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CHILD AND FAMILY SERVICES PLAN
Utah Division of Child and Family Services
Federal Fiscal Years 2010-2014
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Executive Summary

On June 28th, 2007, at the recommendation of the National Center for Youth Law (NCYL), Federal Judge Tena Campbell dismissed the David C. (formerly David C. v. Leavitt) lawsuit, a child welfare reform class action filed in 1993. The state's child protection system successfully exited Federal Court supervision by investing heavily in the state's child welfare infrastructure. While continuing to focus on the needs of children, the Division of Child and Family Services (DCFS) devised and implemented a new Practice Model, supported increased training of workers, decreased worker caseloads by funding new caseworker and support positions, built family centered teams that work with families to develop solutions to issues they face, and developed exceptional leadership that uses best practices to guide policy and resource development.

Since the beginning of the lawsuit DCFS and its partners have:

- Increased the number of caseworkers
- Trained all workers in the use of the Practice Model and Practice Skills
- Provided mentors to help new workers enhance their skills and abilities
- Made sure each child in its care received medical, dental and mental health check-ups
- Trained and licensed increasing numbers of foster parents
- Moved many children quickly from foster care to permanent homes, either back with their own parents or through adoption.

In the past decade, while under court supervision, Utah's children and families have reaped the benefits of a widening array of child welfare services. This plan, and the goals and objectives outlined, are designed to augment those achievements.

The most serious systemic risk to these goals and objectives is the ongoing economic crisis. If the state's economy continues to worsen, it is feared that diminishing state and/or federal funding could seriously hamper the division's ability to achieve these goals and enhance existing programs and services.

Nevertheless, DCFS remains committed to its obligation to provide innovative, transparent and quality services to the children and families it serves. In an effort to fulfill that obligation, improve service delivery outcomes for children and families, as well as expand programs and services that promote child safety, permanency and wellbeing, over the next five years DCFS will:

1. Implement the Safety Decision Making Model throughout all division programs and services
2. Develop new and enhance existing in-home services and community partnerships that will decrease threats of harm, decrease child vulnerability, increase protective capacity, and ultimately facilitate child safety
3. Enhance Transition to Adult Living program and service delivery systems that support a youth's ability to achieve permanency and live independently.



DCFS will also enhance services associated with the following CAPTA program areas by:

- Developing guidelines and procedures to assure consistency of intake practice
- Assessing alternative or differential response systems and models and evaluating the feasibility of using those models to intervene with and provide services to families in a more supportive way
- Establishing specialized and program specific Child Protective Service (CPS) training.

Finally, when necessary DCFS will seek technical assistance from federal funding sources as well as from national non-profit foundations committed to improving the nation's child welfare system. It will also continue to coordinate programs and services through its collaboration with community-based child welfare agencies, service providers, and clients it serves.



Acronyms

Acronym	Definition
ACLSA	Ansell-Casey Life Skills Assessment
ASFA	Adoption and Safe Families Act of 1997
ASQ	Ages and Stages Assessment
ASQSE	Ages and Stages Social/Emotional
BSW	Bachelor's Degree in Social Work
CAPTA	Child Abuse Prevention and Treatment Act
CBCAP	Community-Based Child Abuse Prevention Program
CBCL	Child Behavior Checklist
CFA	Child and Family Assessment
CFCIP	Chafee Foster Care Independence Program
CFSP	Child and Family Services Plan
CFSR	Child and Family Services Review
CFT	Child and Family Team
CHEC	Child Health Evaluation and Care
CHIP	Child Health Insurance Program
CIP	Court Improvement Process
CPR	Case Process Review
CPS	Child Protective Services
DAS	Department of Administrative Services
DCFS	Division of Child and Family Services
DHS	Department of Human Services
DJJS	Division of Juvenile Justice Services
DOH	Department of Health
EOC	Emergency Operations Center
ETV	Education Training Voucher (Program)
FDA	Federal Food and Drug Administration
FVPSA	Family Violence Protection and Services Act
GSSW	Graduate School of Social Work
HHS	Health and Human Services
ICAMA	Interstate Compact on Adoption and Medical Assistance
ICPC	Interstate Compact on the Placement of Children
ICWA	Indian Child Welfare Act
IDEA	Individuals with Disabilities Education Act
IEP	Individual Education Plan
IEPA	Inter-Ethnic Placement Act
IHS	Institute for Human Services
ILP	Independent Living Plan
IOU	Initiative for Utah's Children in Foster Care



MEPA	Multi Ethnic Placement Act
MHA	Mental Health Assessment
MSW	Master's Degree in Social Work
NCANDS	National Child Abuse/Neglect Data System
NCYL	National Center for Youth Law
ORS	Office of Recovery Services
ORSIS	Office of Recovery Services Information System
USSDS	Unified Social Services Delivery System
PACMIS	Public Assistance Case Management Information System
PCMC	Primary Children's Medical Center
PCP	Primary Care Provider
PSSF	Promoting Safe and Stable Families
QCR	Qualitative Case Review
QIC	Quality Improvement Committee
ORSIS	Office of Recovery Services Information System
RFP	Request for Proposal
SACWIS	Statewide Automated Child Welfare Information System
SSW	Social Services Worker
TAL	Transition to Adult Living Services
UAFSC	Utah Association of Family Support Centers
UDVC	Utah Domestic Violence Council
UFAFA	Utah Foster Adopt Family Association
UFCF	Utah Foster Care Foundation
USSDS	Unified Social Services Delivery System
WCC	Well Child Check
WIA	Workforce Investment Act
YARN	Young Adult Resource Network



SECTION I

Scope of Plan [1357.15 a]

The Child and Family Services Plan for the State of Utah for Federal fiscal years 2010-2014 incorporates into a single plan requirements and directives articulated in the following legislation:

- Title IV-B Part 1, Child Welfare Services
- Title IV-B Part 2, Promoting Safe and Stable Families (PSSF)
- Title IV-B Part 2, Promoting Safe and Stable Families (PSSF)-Caseworker Visitation
- Child Abuse and Prevention and Treatment Act State Grant Program (CAPTA)
- Chafee Foster Care Independence Program (CFCIP)
- Education and Training Voucher Program (ETV)

This document also identifies activities that pertain to the following federal statutes:

- Indian Child Welfare Act (ICWA)
- Interstate Compact on Adoptions and Medical Assistance (ICAMA))
- Interstate Compact on the Placement of Children (ICPC)
- Inter-country adoptions
- Multi-Ethnic Placement Act (MEPA)/Inter-Ethnic Placement Act (IEPA).

Assurances [1357.15 (c)]

The plan supports the State's efforts to attain the desired outcomes of safety, permanency, and wellbeing for children and families in Utah and of operating a more comprehensive, coordinated, and effective child and family services delivery system. The Division of Child and Family Service assures that:

- The state will participate in any evaluations the Secretary of HHS may require
- It will administer the Family Service Plan in accordance with methods determined by the Secretary to be proper and efficient
- It has a plan for providing training to staff.

Distribution [45 CFR 1357.15 (v)]

This document will be distributed to the following agencies or individuals.

- Regional Administrator-Administration on Children and Families
- Child and Family Program Specialist for Utah-Administration on Children and Families
- Executive Director-Department of Human Services

It will also be available to other interested parties at their request.



Planning Process [1357.15 (b); 1357.15 (k) (3)]

This plan has been developed jointly between the Administration for Children, Youth and Families and has been prepared after consultation with various state and local government entities as well as numerous non-profit, community-based agencies with which the division coordinates service delivery.

Partners are an integral part of the division's planning process and are involved in activities related to the formal statewide assessment (conducted every five-years in association with the Child and Family Services Review) that identifies strengths and needs of the state's child welfare service delivery system. The next statewide assessment is due to the U.S. Department of Health and Human Services by February 2010.

Agency partners are also involved in the planning process through their involvement in Quality Improvement Committees (QIC) conferences, and frequent collaborative meetings. Partners were also involved in each of three five-year joint planning meetings held May 13, 2009. Division and department staff, representatives from the Children's Bureau, and ACYF regional office in Denver were also in attendance. The first meeting focused on the implementation of the Safety Model and development of systems that will support workers use of the Safety Model as they strive to help the clients they serve. The second meeting focused on participant's desire to develop new or enhance existing in-home services that will help maintain at-risk children in their homes. At the third meeting, participants developed new Transition to Adult Living service delivery goals, as well as identified enhancements to existing services funded in part through Chafee Foster Care Independence program and Educational and Training Voucher grants.

The planning process also includes monthly planning meetings. The Administrative Team uses information provided by the Program and Practice Improvement Team and the Information, Evaluation and Research Team to assess progress of goals and objectives, identify gaps in service, as well as determine the status of child and family outcome measures. Program and service outcome data, goals and objectives are also reviewed at both quarterly Regional Director meetings and in monthly Mid-Manager meetings

State Agency Administering Programs [1357.15 (e)(1)]

The State of Utah Department of Human Services (DHS) has delegated authority from the Governor, the Chief Executive Officer of the State of Utah, to submit the Child and Family Services Plan and sign required federal assurances. The department is responsible for the administration of programs and services provided using funding provided through Titles IV-B, IV-E, and XX of the Social Security Act and has designated the Division of Child and Family Services (DCFS) as the agency responsible for implementing and providing direct oversight of Title IV-B and Title IV-E



programs and services delivered to Utah's children and families. DCFS is the single state agency responsible for developing, administering, and supervising the federal Child and Family Services Plan (CFSP).

Management Structure

The division is the lead child welfare agency for the State of Utah and is responsible for agency planning, legislative matters, federal programs coordination, policy development, information system development and maintenance, as well as overall management of division programs and services.

The state office, located in Salt Lake City, Utah, contains the Director's Office, support service teams representing Budget and Accounting; Grants and Federal Revenue; Professional and Community Development; Information, Evaluation, and Research; as well as SAFE Management Information Systems. The Program and Practice Improvement Team is composed of staff that direct and coordinate Adoption, Child Abuse Prevention, Child Protective Services, Domestic Violence, Transition to Adult Living (TAL), In-Home, Kinship, and Permanency (Out-of-Home) programs and services as well as staff that monitor and evaluate client outcome data generated from Quality Case Reviews (QCR) and Case Process Reviews (CPR). Also located in the state office are staff members responsible for overseeing services provided through ICWA, ICAMA, and ICPC, as well as staff that provide Public Affairs, Background Screening, and Constituent Services.

The DCFS Administrative Team, the unit responsible for oversight of the CFSP and Child and Family Services Review (CFSR), is comprised of the Director, two Deputy Directors, Director of Data and Information Systems, Director of Finance, Program and Practice Improvement Director, Professional and Community Development Manager, and the Federal Revenue Manager. It is the body that has primary responsibility for planning, budgeting, decision-making, and communications for the division. This group meets weekly and on an ad hoc basis to conduct the business of the division. In addition, Regional Directors and other key state office staff members join this team in a monthly statewide administrative meeting.

Agency staff members, located in five geographically defined regions, deliver services statewide to children and families. A Regional Director leads each region and has delegated authority to manage the region, including deploying resources, creating contracts, forming inter-agency partnerships, and making personnel decisions.

DCFS personnel deliver a variety of supports and services to agency clients. It also contracts with private or non-profit providers for a number of supports and services in accordance with requirements of federal law. The division acts as the agency responsible for establishing standards for all direct or contract program and service providers, and while the Department of Human Services is responsible for yearly audits of contracts, DCFS is responsible for monitoring contracted services to ensure that all program standards and contract stipulations are met.



Vision/Mission 1357.15 (g)

Vision

Safe Children, Strong Families

Mission

Child and Family Services protects children at risk of abuse, neglect, or dependency. We do this by working with families to provide safety, nurturing, and permanence. We lead in a partnership with the community in this effort.

Practice Model Principles, Skills, Standards [1357.15 (p)]

Practice Principles

Practice Model Principles guide Child and Family Services as it strives to achieve its vision and meet its mission. They are consistent with child and family services principles specified in federal regulations [45 CFR 1355.25(a) through 1355.25(h)].

Principle One - Protection. Children's safety is paramount; children and adults have a right to live free from abuse.

Principle Two - Development. Children and families need consistent nurturing in a healthy environment to achieve their developmental potential.

Principle Three - Permanency. All children need and are entitled to enduring relationships that provide a family, stability, belonging, and a sense of self that connects children to their past, present, and future.

Principle Four - Cultural Responsiveness. Children and families are to be understood within the context of their own family rules, traditions, history, and culture.

Principle Five - Partnership. The entire community shares the responsibility to create an environment that helps families raise children to their fullest potential.

Principle Six - Organizational Competence. Committed, qualified, trained, and skilled staff, supported by an effectively structured organization, help ensure positive outcomes for children and families.

Principle Seven - Professional Competence. Children and families need a relationship with an accepting, concerned, empathetic worker who can confront difficult issues and effectively assist them in their process toward positive change.



Practice Skills

A set of key Practice Skills has been formulated from the Practice Model Principles and are designed to "Put Our Values Into Action." These basic skills are:

Engaging. The skill necessary to effectively establish a relationship with children, parents, and individuals that work together to help meet a child or family's needs or resolve their child welfare related issues.

Teaming. The skill that workers use to assemble, become a member of, or lead a group or groups that supply needed support, services and resources that help children or families resolve critical child and family welfare related issues. Child welfare is a community effort and requires a team.

Assessing. The skill that enables workers to obtain information about salient events and underlying causes that trigger a child or family's need for child welfare related services. This discovery process helps children and families identify issues that affect the safety, permanency, or wellbeing of the child, helps children and families discover and promote strengths they can use to resolve issues, determines the child or family's capacity to complete tasks or achieve goals, and ascertains their willingness to seek resources that will support efforts they make to resolve their issues.

Planning. The skill that workers use to identify and design incremental steps that move children and families from where they are to a better level of functioning. The planning cycle includes assessing a child or family's child welfare related issues and resources, helping them make decisions about what programs, services, or resources they want to use to meet their needs, helping them evaluate the effectiveness of their decisions, helping a child or family rework or revise their service delivery plan, helping them celebrate successes when they occur, and helping them face consequences when their plan fails to achieve the desired results. The outcome of the planning process is the development of a unique service delivery plan tailored to the needs of the individual child or family.

Intervening. The skill used to intercede when a child or family's interactions, activities, or behaviors are not decreasing risk, providing safety, promoting permanency, or assuring the wellbeing of a child. This skill continues to improve with time and may be used for a variety of reasons and in a number of situations including when helping families find housing, helping a parent change negative patterns of thinking about their children, or helping members of a family change their relationship with each other.

Practice Standards

Following are general practice standards that cross program boundaries. Together with practice principles and skills these standards will help workers understand their roles and responsibilities. Standards are also designed to give guidance to workers as they strive to achieve safety, permanency and wellbeing for each child and family member they help.



A. Service Delivery Standards

1. Children and families will receive individualized services matched to their strengths and needs and, where required, services will be created to respond to those needs.
 - a. Prevention services help resolve family conflicts and behavioral or emotional concerns before there is a need for the family to become deeply involved in the child welfare system.
 - b. In a family where abuse has already occurred, interventions will be developed with the goal of preventing any future incidents of abuse.
2. Services provided to children and families will respect their cultural, ethnic, and religious heritage.
3. Services will be provided in-home-based and neighborhood-based settings that are most appropriate for the child or family's needs.
 - a. Services will be provided in the least restrictive, most normalized setting appropriate.
4. Children and families will be actively involved in identifying their strengths and needs, and in matching services to identified needs.
 - a. Meaningful child and family participation in decision-making is vitally important. To the level of their abilities, children and family members shall have a voice in influencing decisions made about their lives, even when specialized communication services are required.
5. In whatever placement is deemed appropriate siblings should be placed together. When this is not possible or appropriate, siblings should have frequent opportunities to visit each other.
6. When out-of-home placement is required, children should be placed in close proximity to their family and have frequent opportunities to visit.
7. When children are placed in an environment outside of their parent's home, they must be provided with the support needed to help them achieve their educational and vocational potential with the goal of becoming self-sufficient adults.
8. Children receiving services must receive adequate, timely medical and mental health care that is responsive to their needs.

B. Standards Relating to Child and Family Teams

1. Organizing staff into a multi-disciplinary team is the most effective way to supply services to children and families.
 - a. Family and personal dynamics are best served with a Child and Family Team that has diverse and multi-faceted skills.
 - b. The use of Child and Family Teaming is vital to ensure that best practice decision-making occurs.
 - c. Regular use of Child and Family Teams is the best way to engage the family and prevent and reduce incidents of abuse.
2. Whenever possible, critical decisions about children and families, such as service plan development and modification, removal, placement, and permanency, will be made by a team to include the child and his/her family, the family's informal helping systems, foster parents, and formal agency stakeholders.
 - a. Because children and families rely on service teams, teams should meet face-to-face periodically to coordinate assessments, case planning, services delivered, track progress, and as families adapt to the case plan, provide attention to the factors that affect family violence.



C. Standards Relating to Assessments

1. Strengths-based assessments are vitally important. They should be produced with attention to:
 - a. The family's underlying needs and conditions.
 - b. Safety issues for all family members when abuse has occurred.
2. Children who are neglected or abused will have immediate and thorough assessments leading to decisive, quick remedies for the immediate circumstances, followed by long-range planning for permanency and wellbeing.

D. Standards Relating to Planning

1. Children and/or their family members shall be involved in the planning process, and shall be supported when they request changes to their plan.
2. Development of child and family plans that are adaptable to the changing needs of a child and family throughout the case is fundamental. The child and family plan:
 - a. Incorporates the family's input.
 - b. Utilizes available assessments.
 - c. Is built on a comprehensive array of services designed to permit children and families to achieve the goals of safety, permanency, and wellbeing.
 - d. Reflects the service team's contributions.
 - e. Anticipates crucial transitions.
 - f. Ensures safety for both child and adult victims.
 - g. Is employed as a functional case tool that guides actions in the case.
3. The Child and Family Team will individualize service plans.
 - a. Individualized plans will:
 - i. Employ a comprehensive assessment of the child and family's needs.
 - ii. Attend to and utilize the strengths of the child and his/her family.
 - iii. Include specific steps and services that reinforce identified strengths and meet the needs of the family.
 - iv. Specify steps to be taken by each member of the team, time frames for accomplishment of goals, and concrete actions for monitoring the progress of the child and family.
4. Workers and supervisors will regularly review and evaluate whether the team has been able to adequately implement the plan (including crisis and safety plans).
 - a. The review will include an evaluation of the timelines of service delivery, and consideration of progress made by each family member.
 - b. The review will also include an evaluation of contributions made by team members (including the family).

E. Standards Relating to Intervening

1. Workers should engage the family in crafting effective interventions that address the family's needs.
2. Workers should develop interventions with a family when there are family conflicts or a family member's behavioral or emotional needs are not being met or when a family member's behavior or emotions affect the safety of a child.



Target Area/Populations, At-Risk/Vulnerable Populations, and Availability of Resources [1357.15 (d)(3)]

Target Area/Population

Any individual permanently or temporarily residing within the boundaries of the State of Utah is considered a part of the target population. Individuals considered at-risk or vulnerable include:

- Children experiencing or at-risk of experiencing abuse or neglect
- Minors committed to the custody of the Division of Child and Family Services on grounds other than abuse or neglect
- A newborn child whose parent or a parent's designee safely relinquishes that child at a hospital so long as the child has not been subject to abuse or neglect
- A child voluntarily placed into the custody of the division by the child's parent or guardian
- Any male or female victim of domestic violence, including their children
- Children currently in, or that require placement in, an out-of-home setting such as a shelter or foster care placement including:
 - Any child in an out-of-home placement that is available for adoption
 - Youth that will potentially age out of foster care
- Kin caregivers caring for the child or children of a relative who has been determined to be temporarily or permanently incapable of providing safety for their children
- Parents that require in-home agency services to either maintain the family as a family unit or reunify the family
- Individuals or families who are potential foster parents or potential adoptive parents of a child in foster care
- Individuals, groups, or families requesting or requiring information to prevent the occurrence of abuse or neglect or require information related to any program or service provided by the agency.

Availability of Services and Resources

Services

With few exceptions, children and families in Utah have reaped the benefit of a wide array of conveniently available services. Those that may not have the breadth of services include the 27% of the state's population that live in rural areas with fewer than 15 residents per square mile. Some rural areas lack various mental health and medical services, as well as educational programs such as parenting classes. At times, children and families have to travel great distances to access services and occasionally the lack of services results in the need to place children in out-of-home settings far from their family.



Also, urban and rural areas lack some “specialized” services as well as services applicable to diverse populations. These services include respite care services for kin families, foster parents, and adoptive parents, culturally responsive housing resources, educational services available in Spanish, as well as language appropriate information and referral services.

In addition, because some urban and rural mental health service practitioners lack the experience needed to help families provide safe and nurturing homes for their children, referrals occasionally have to be made to experienced providers that may not be as conveniently located.

Resources

The most serious systemic risk to programs and services provided by the division is the ongoing economic crisis. Following a special legislative session in September 2008, DCFS made significant cuts to costs of overhead. Additional state funding was eliminated during the regular legislative session in 2009, resulting in the elimination of some positions, cuts to in-state and out of state travel, as well as a reduction in mileage rates reimbursed to employees who use their personal vehicles for business use.

Most cuts have been carried through to FY 2010. For fiscal year 2009, state-matching funds will remain in place for federal grants requiring those allocations. Yet, if the state’s economy continues to worsen, it is feared that diminishing state funding could not only directly impact services delivered to our clients but could indirectly impact service delivery because of our inability to obtain full federal funding made available through mandatory or discretionary federal grants.

Program and Service Continuum [45 CFR Part 1357.15 (n)]

The Division of Child and Family Services program and service continuum encompasses a non-linear array of services, varying in intensity and duration, which are accessed according to specific needs. Services funded through Federal programs, including the Stephanie Tubbs Jones Child Welfare Services (Title IV-B Part 1), Title IV-B Part 2 (PSSF), CAPTA, CFCIP, ETV, FVPSA, Title IV-E, and CBCAP are an integral part of the DCFS service continuum.

Direct services are provided statewide by regional program staff assigned to the Adoption Program, Child Abuse Prevention Program, Child Protective Services, Domestic Violence Program, Transition to Adult Living (TAL) Program, In-Home Program, Kinship Program, or Permanency (Out-of-home) Program. Finally, under the guise of the Indian Child Welfare program workers ensure programs and services delivered by the agency adhere to ICWA.



Adoption Program

Population Served

The Adoption Program strives to provide an adoptive home for every legally free child in DCFS custody as well as for children in DCFS custody where adoption has been determined to be the most appropriate permanency goal. The Adoption Program also provides support and adoption assistance to an adoptive family of a child with special needs.

Services Provided

Adoption services include:

- Placing children for adoption
- Subsidizing adoptions
- Supervising adoption placements until the adoption is finalized by the court
- Conducting adoption studies
- Preparing adoption reports upon request of the court
- Providing post-adoptive placement services, upon request of a family, for the purpose of stabilizing a possible disruptive placement.

Comment [d2]: Utah State Code 62A-4a-101 (2)

To assure compliance with its child welfare responsibilities, the Adoption Program recruits resource family adoptive homes that are child-specific and that meet the child's cultural and ethnic needs. It also conducts resource family evaluations (a dual foster care and adoption evaluation), coordinates foster to adopt legal-risk placements, oversees adoptive placements, provides adoption assistance and post adoption services, and develops community resources that also provide post-adoption services.

Utilizing Promoting Safe and Stable Families (PSSF) funding, the Adoption Program conducts promotion and recruitment activities as well as provides post-adoption support. Regional office post-adoption clinical staff help adoptive families with special family needs, help mediate crisis situations, provide information from the child's records, and access community resources.

Adoptive parents who adopt children from other countries may receive DCFS post-adoption services. Depending on the availability of funding, many community resources and services are also available to inter-country adoptive families.

Child Abuse Prevention Program

Population Served

Child Abuse Prevention coordinates prevention services delivered by contract providers and collaborates with other organizations that serve families or children that are at-risk of committing or may become a victim of child abuse or neglect.



Services Provided:

- Intensive home visiting including in-home clinical services
- Home-based parent education
- Clinical outpatient mental health services
- Support groups for children who are being cared for by their grand parents
- Parent education programs
- School-based prevention related education and child mentoring
- Public awareness and advocacy education
- Respite Care.

Criteria for funded programs state that child abuse prevention efforts must:

- Give priority to programs that are universal (primary) and voluntary
- Be evidence-based or evidence-informed
- Be adapted to the complex and diverse cultural needs of Utah's communities
- Be collaborative, including involving parents in program planning and implementation
- Be accomplished by public-private partnerships.

While DCFS may refer families with an open CPS case to services, it is not necessary to have an open case in order for a family to access services supported by the Child Abuse Prevention Program. In fact, many families are referred to services through schools or other community-based organizations. Each program defines its own catchment area and while eligibility requirements vary by program, no program requires families to meet an income test in order to receive services.

Child Protective Services

Population Served

Children who are the subject of a referral for child abuse, neglect, or dependency qualify for investigation services.

A child qualifies for an investigation when an allegation is reported that meets one of the following definitions:

Abuse-including child endangerment, domestic violence related child abuse, emotional abuse, providing material harmful to a child, physical abuse, fetal exposure to alcohol or other substances, fetal addiction to alcohol or other harmful substances, and pediatric condition falsification (formerly known as Munchausen's Syndrome by Proxy).

Neglect-including medical neglect, Baby Doe (congenital birth defect that parents or a caregiver declines to treat), failure to thrive, neglect of a child's physical health, neglect of a child's psychological health, neglect of child's dental health, pediatric condition falsification (formerly



known as: Munchausen's Syndrome by Proxy), physical neglect, sibling or child at risk, educational neglect, failure to protect, non-supervision, abandonment, environmental neglect, dependency including a child who is homeless, without proper care or whose parent or guardian is institutionalized and cannot arrange for safe and appropriate care for the child.

Services Provided

Child Protective Services (CPS) receives reports of possible abuse, neglect, or dependency, investigates reports, determines if the child is safe, assesses threats of harm or child vulnerability, assesses the capacity of the parent or caregiver to protect the child, and determines the need for referral to services that provide in-home support. CPS also provides an out-of-home placement for children who are unable to safely remain with their parent or caregiver.

CPS is the most likely entry point to services that provide for the safety and wellbeing of a child and family. CPS works in partnership with a variety of community-based education and service programs that offer prevention services including:

- Advocacy services for children, youth, families, and parents
- After-school programs
- Crisis respite care
- Child abuse prevention education and advocacy
- Family resource and support services
- Parenting skills and training
- Protective day care
- Community development initiatives.

Domestic Violence Program

Population Served

The target population is defined as any victim of domestic violence in Utah, as well as the victim's dependent children.

Services Provided

Domestic Violence Program staff and partner agencies provide outreach and case management services to victims of domestic violence. Specific services include:

- Emergency Shelter
- Crisis intervention
- Individual and group counseling
- Education
- Referrals
- Advocacy
- CPS referrals when necessary.

In a support role, workers participate in criminal, civil, and juvenile court hearings, facilitate child and family team meetings, participate in the development of child and family plans, help develop



client risk assessments, and write safety plans when needed. In collaboration with local domestic violence coalitions and the Utah Domestic Violence Council (the state coordinating council) workers may help recruit members for local domestic violence coalitions, conduct ongoing needs assessments, provide technical assistance, monitor the activities of contract providers, provide training and educational presentations to agencies or the community, and provide case consultation.

Program staff adhere to working agreements between DCFS and the criminal justice system that provide guidance on the collection of domestic violence law enforcement incident reports, protective orders, and treatment court orders. They also collaborate with shelter directors, who meet monthly, as well as with the Prosecution Counsel, which provides annual domestic violence training.

Indian Child Welfare Services

Population Served

The Indian Child Welfare Program serves:

- Native American children and families in the State of Utah
- Native American tribes and organizations as well as other community organizations that serve Native American children and families.

Services Provided

ICWA Program staff:

- Form partnerships and coalitions between DCFS, community organizations, Native American organizations and tribes
- Broaden communications and aid in dissemination of information that increases sensitivity to cultural, religious, and ethnic needs of Native American children and families
- Strengthen DCFS workers responsiveness to the needs of Native American children by facilitating ongoing conversations with tribal leaders and refining Indian Child Welfare Agreements dealing with the care and custody of Indian children
- Host an annual ICWA conference that focuses on the intent of the Indian Child Welfare Act and its effect on child protection, permanency, kinship, adoption, and in-home services
- Provide training that identifies Native American culture and traditions, outlines relationships between DCFS and tribes, specifies requirements for the timely assessment of Indian heritage, and which tribes use to determine whether a child is enrolled or eligible for tribal services.



In-Home Program

Population Served

The In-home Program serves children at-risk of abuse, neglect, or dependency. The program also services parents or caretakers that are having difficulties with parenting and are at-risk of having their child or children removed from the home and placed in an alternate setting. In home services sustain, strengthen, and enrich the capacity of parents to meet the requirements of parenting while assuring the safety and wellbeing of children. The need for service may be based on any of the following criteria:

Home-based services are appropriate when there is a need for ongoing monitoring by DCFS, when the family is willing to accept home-based services, and any of the following conditions exist:

1. A child has experienced abuse or neglect but can remain safely in the home
2. When a child is returned home from out-of-home care
3. When an adoptive placement may disrupt or dissolve and intensive services are needed to maintain the family in the adoptive home
4. When reunification is likely within 14 days and intensive support is needed to prepare for and facilitate the reunification.

Services Provided

Specific services fall under one of four categories:

1. Voluntary services (i.e. Protective Services Counseling)
2. Court-ordered services (i.e. Protective Services Supervision)
3. Intensive short-term services (i.e. Protective Family Preservation) provided to children who are at immediate risk of an out-of-home placement
4. Reunification.

The following services are either directly provided by regional DCFS In-home services staff or through contract with participating partners:

- Family preservation services
- Child custody home evaluation
- Individual and family counseling
- Parenting skills training and education
- Homemaker services
- Sexual abuse treatment
- Protective services counseling/supervision
- Protective day care
- Youth advocate program
- Parent advocacy
- Clinical counseling
- Peer parenting
- Community-based family support services.



Kinship Services

Population Served

Kinship services are made available to non-custodial parents, relatives, or friends, selected for placement and care of a relative or friend's child in Child and Family Services custody.

Services Provided

Workers may:

- Conduct assessments to determine the ability and willingness of kinship caregivers to provide a home for a relative
- Provide referrals to agencies that may help the caregiver become a licensed foster care provider, obtain guardianship status, or attain extra supports and services
- Identify or provide parenting and other educational services
- Supply assistance in submitting applications and supporting documents needed to obtain financial benefits including applications to the
 - ☐ Office of Recovery Services (ORS) which may help the family obtain child support
 - ☐ The Department of Workforce Services that provides public assistance
 - ☐ Social Security that may provide Supplemental Security or Disability payments
 - ☐ DCFS for a foster care or special needs payment.
- Offer assistance in submitting applications and supporting documents needed to obtain medical benefits from:
 - ☐ Medicaid
 - ☐ The Children's Health Insurance Program (CHIP) private medical insurance
 - ☐ DCFS, which may provide medical coverage to the end of the month following the month a child is ordered into Child and Family Services custody.

Permanency (Out-of Home) Program

Population Served

The Permanency (Out-of-Home) Program provides short-term, culturally responsive placements and services to a child and/or family when the child has been removed from their home due to risk of abuse, neglect, or dependency or voluntarily placed with DCFS by parent/guardian.



Out-of-home services are provided to:

- A child placed in the custody of the division by court order and the child's parent or guardian, if the court orders reunification
- A child placed in the custody of the department by court order for whom the division is given primary responsibility for case management or for payment for the child's placement, and the child's parent or guardian if the court orders reunification
- A child voluntarily placed into the custody of the division by the child's parent or guardian.

Services Provided

Permanency is the desired outcome of out-of-home care. Permanency options supported by this program include return to the home of natural parents, non-relative guardianship, relative guardianship, adoption, and individualized permanency.

Out-of-home services fall into one of three categories. Those categories are:

1. Protection, placement, supervision and care of the child
2. Services to a parent or guardian of a child receiving out-of-home services when a reunification goal is ordered by the court or to facilitate return of a child home upon completion of a voluntary placement
3. Services to facilitate another permanent living arrangement for a child receiving out-of-home services if a court determines that reunification with a parent or guardian is not required or in the child's best interests.

Specific services include:

- Room, board, and supervision of children in the following types of placements:
 - Foster care
 - Voluntary foster care
- Residential/Group care
- Accessing medical, dental, mental health care, education, disability, and other services for children in Child and Family Services custody
- Working with parents or guardians of children in custody when reunification is the goal
- Subsidized guardianship
- Peer parenting and parenting education
- Time-limited reunification services
- Administration of the Interstate Compact for the Placement of Children



Transition to Adult Living Program (Chafee Foster Care Independence Program/ETV Program)

Population Served

- Youth ages 18 through 20 years who were in foster care on their 18th birthday,
- Youth age 14 and older in foster care.

Services Provided

Prior to exiting state custody, the Transition to Adult Living Program ensures youth in foster care, or who have recently exited foster care, have access to program services that will help them establish skills and obtain knowledge necessary to maintain self-sufficiency after exiting state custody. The Transition to Adult Living Program:

- Provides education, training, and services necessary to obtain employment or to prepare for and enter post-secondary training and educational institutions
- Provides personal and emotional support to youth through mentors and the promotion of interactions with dedicated adults
- Provides financial, housing, counseling, employment, education and other appropriate support and services to former foster care recipients between 18 and 21 years of age.

Specific services include:

At age 14 workers provide the following services to youth. They:

- Initiate and complete the Ansell-Casey Skills Assessment
- Help Youth obtain a birth certificate
- Develop a TAL plan that focuses on social activities, improving self-image, and developing skills such as laundry, preparing meals, and cleaning (household chores)
- Explore the need to help youth access a mentor
- Revisit the youth's family and search for family connections
- Help youth explore significant safe and healthy relationships including those with family, school counselors, family friends, neighbors, mentors, and others as important to the youth.

On top of those services above, at age 15 workers help youth open a savings account and/or incorporate a plan for saving money.



In addition to services and activities completed for youth age 14 and 15, workers participate in the following activities and provide the following services to youth at age 16:

- Initiate a referral to DWS/WIA Youth
- Help youth explore employment opportunities and obtain a part-time job, if appropriate.
- Help youth sign up for and complete driver's education and obtain a drivers license
- Help youth obtain a state identification card if youth cannot get a drivers license
- Begin Life Skills workshops
- Assure youth have sufficient school credits
- Help youth prepare for high school graduation (or prepare an alternate plan in place for GED or vocational training)
- Help youth that are planning to attend post-secondary education complete ACT, SAT, ASVAB and other testing
- Help youth identify five personal connections
- Assure youth begin to facilitate child and family team meetings
- Help youth place their name on the waiting list at Housing Authority, if appropriate.

Workers participate in the following activities and provide the following services to youth, age 17, and likely to remain in Foster Care until age 18:

- Assure youth have sufficient school credits to graduate or have an alternate plan in place to obtain as GED or attend vocational training
- Six months prior to the youth's 18th birthday, enroll the youth in a drivers education course if a youth has not completed drivers' education classes
- Help youth complete applications for school, training, Pell grants, and the ETV program
- Help youth enroll youth that have a mental illness diagnosis enroll in NAMI Bridges for Youth groups.

Prior to exiting foster care, workers provide the following services to youth Ages 18 through 20:

- Assure youth with chronic health problems meet with a nurse to learn skills that will help them self-manage their health problem
- Complete the Medicaid review (prior to exiting care at age 18) and provide necessary supporting documentation to the regional eligibility worker so that Medicaid coverage can continue uninterrupted
- Complete the Checklist for Youth Exiting Care that helps assure that youth have important documents such as birth certificates, Social Security cards, and ID
- Provide, at no cost, a copy of the youth's health and education records if the youth exists foster care by reason of having attained the age of majority.



Promoting Safe and Stable Families Services [1357.15 (o)]

Adoption Promotion and Support

DCFS utilizes adoption promotion and support funding to conduct promotion and recruitment activities as well as provide post-adoption support. Funds will be used to support both direct and contracted services.

Direct Services

Funds will be used to maintain statewide adoption promotion and adoption support program management as well as to retain regional office post-adoption clinical staff that serve adoptive families with special needs, help mediate crisis situations, and help families access community resources. In addition, funds will be utilized for statewide adoption planning, training, and resource development efforts.

Funds are allocated to regions and may be used for post-adoption support for adoptive families. Examples of supports include:

- Respite care
- Crisis assistance
- Behavioral management
- Services to supplement adoption assistance
- Other unique wrap-around services.

In addition, funds will be used to for activities that support individuals and services listed above. Examples of support activities include:

- Training,
- Support groups
- Newsletters and other public affairs activities.

Contracted Services

DCFS will continue to contract with partners that recruit and support adoptive parents as well as with private agencies that, in support of the Department of Human Services Office of Licensing, complete adoption home studies for prospective adoptive families. Funds will also be used to support existing contracts with agencies that concentrate on kinship adoption home studies including studies requested in rural areas, refer families for training and licensing, and/or provide special needs adoption information to families.



Family Preservation

During year one of the plan, funds will continue to be used as they were in the prior five-year plan period, with one exception. Funds will continue to be distributed through Child and Family Services regions for use for family preservation worker positions and for flexible funding to meet a variety of needs of children and families. In addition, a portion of funds will be designated for a position to develop a more effective model for in-home services throughout the State. In years 2-5 of the plan, use of funds will transition to more evidence-based and evidence-informed models of in-home service that help prevent entry into foster care or that help transition and support children after returning home from foster care after time-limited reunification funds are no longer available (e.g., stabilizing families for periods beyond 15 months from removal). This transition will occur in conjunction with the division's goal to enhance in-home services. Examples of uses of funds during year one include the following:

- Unique wrap-around services to address specific needs, such as therapy and educational programs
- Repairing, registering, or paying one to two months of insurance for vehicles needed to transport family members to school, work, or medical appointments
- Assisting families with limited costs of housing including deposits or rent payments
- Essential home furnishings and supplies such as beds for children.

Family Support Services

Family Support Services funding is used to contract with community-based agencies that provide a variety of services to children and families. Fifteen existing contracts in communities throughout the State will continue to be funded through year one and two of the plan. A new request for proposals will be developed and new community-based contracts established for years three through five.

While DCFS may refer families with an open CPS cases to services, it is not necessary to have an open case in order for a family to access services receiving Family Support funding. In fact, many families are referred to services through schools or other community-based organizations. Each program defines its own catchment area and while eligibility requirements vary by program, no program requires families to meet an income test in order to receive services.



Time-Limited Reunification

Time-limited reunification services are provided to children in foster care with a goal of reunification for up to 15 months from removal. Services are also provided to their parents or guardians with whom the children are planning to reunify. These funds are primarily used for:

- Individual, group, and family counseling or other mental health services for parents or foster children
- Inpatient, residential, or outpatient substance abuse treatment services for parents or foster children, including such expenses as initial fees and costs associated with drug courts and drug testing
- Services to provide temporary protective childcare or other therapeutic services, including crisis nurseries
- Assistance to address domestic violence treatment or service needs
- Transportation to or from services and activities.

During the five-year plan period, additional aftercare services that support a child's transition home from foster care will be developed and/or contracts established as a resource to help stabilize a child and family at home (with funding available for a period up to fifteen months from the child's original removal from home).

Proposed Expenditure of Promoting Safe and Stable Family Funding [1357.15 (s)]

Funds for Title IV-B Subpart 2 will be distributed as follows:

	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Family Support	20.00%	20.00%	20.00%	20.00%	20.00%
Family Preservation	36.00%	36.00%	36.00%	36.00%	36.00%
Adoption	22.00%	21.00%	20.00%	20.00%	20.00%
Time-Limited Reunification	20.00%	21.00%	22.00%	22.00%	22.00%
Administration and Training	2.00%	2.00%	2.00%	2.00%	2.00%
Total	100%	100%	100%	100%	100%

Allocations for each fiscal year meet "significant portion requirements" as outlined in the Program Instructions.



Goals and Objectives[1357.15 h,i]

DCFS utilizes its SAFE Management Information System to track client identifying information as well as monitor services delivered to children and families. The division uses this data, as well as state and national demographic information in the planning process. Data is also used to provide state or federal legislators with information they need to formulate laws that support programs and services as well as to provide federal, state, or private funding sources data they need to appropriate funding for child and family services delivered by the division. The following demographic and outcome related data have been used in the formulation of goals and objectives outlined below.

Demographic Trends

Increasing Child Population

Projected Total Number of Children 0-17														
2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
721,189	731,250	741,780	754,826	769,035	790,121	809,540	834,070	857,680	878,349	899,090	920,366	941,737	962,323	982,314

Currently, the population of Utah is younger than the national average. Utah's school age population (age 5-17) is anticipated to increase by over 21 percent between 2003 and 2011. This trend will continue until 2012 when the rate of growth of the school-age population reaches its peak.¹ By 2014 projections indicate there will be 982,314 children in the State of Utah a 36.2% increase when compared to the population of children in 2000.

Ethnic, Racial, Cultural Background

The Hispanic or Latino population in Utah experienced 138% growth between 1990 and 2000 and now is the largest minority, comprising 11.2% of the population. Non-Hispanic African Americans are expected to comprise 0.9 percent of the state population in 2025, up from 0.7 percent in 1995 and non-Hispanic American Indians, Eskimos, and Aleuts are expected to comprise 1.9% of the 2025 up from 1.4% in 1995. In addition, non-Hispanic Asians and Pacific Islanders are expected to increase from 2.3% percent of the population to 3.7% in 2025.²

Economically Disadvantaged/Homelessness

In January 2007, Utah's unemployment rate was a post-World War II low of 2.7%. According to the 2009 Economic Report to the Governor,³ "Employment growth fell from 4.0% in 2007 to .2% in 2008 and is forecast to contract 1.5% during 2009. In February 2009, the unemployment rate

¹The Utah Aging Initiative Anticipating the Opportunities and Challenges of Our Aging Population. Utah Department of Human Services Center for Public Policy and Administration-University of Utah www.hsdaas.state.ut.us/pdf/aging-initiative.PDF

² Campbell, Paul R., 1996, "Population Projections for States, by Age, Sex, Race and Hispanic Origin: 1995 to 2025," Report PPL-47, U.S. Bureau of the Census, Population Division. Located at <http://www.census.gov/population/projections/state/9525rank/utprsrrel.txt>

³ Utah Governor's Office of Planning and Budget, Economic Report to the Governor, January 9, 2009. (Located at www.governor.utah.gov/dea).



continued to rise, increasing to 5.1%, with Utah's employment contraction increasing to 2.1%. Furthermore, it is anticipated that Utah's unemployment rate will approach 7%, with strong numeric job losses through at least June of 2010.⁴

On any particular day in 2008, 3,000 people were homeless in Utah. Families comprised over 44% of Utah's homeless population, up from 39% in 2007. There were 8,016 homeless school children and over 27% of the homeless were age 17 or under, up from 24% in 2007.⁵ As many as 85% are Utah residents and 90% live along the Wasatch Front with the greatest concentrations in Salt Lake and Weber counties.⁶

⁴ Lois M. Collins, Utah Jobless Rate at 5%-and Rising, Deseret News, March 24, 2009, (Located at <http://deseretnews.com/article/1,5143,705292839,00.html>)

⁵ Utah Community Action Partnership Association, Fact Sheet -Pamela Atkinson Homeless Trust Fund: Home For Homeless People, January 28, 2009. (Located at <http://www.utahhousing.org/index.htm>)

⁶ Bear River Association of Governments, Plan to End Chronic Homelessness in the BRAG Area by 2014, November, 30, 2007. (Located at www.brag.utah.gov/pdf/BRAG_Homeless_Plan.pdf)



Goals and Objectives

Priority Area Safety/ Permanency/ Wellbeing	Inputs	Goal/Objective	Baseline	Process/Outcomes Measure	Due Date	Person(s)/ Group(s) responsible
Safety	Casey Family Foundation, National Resource Center, Court Improvement Project, Former Safety Model Planning Committee	1 Implement the Safety Decision Making Model throughout all division programs and services in an effort to enhance child safety and improve key outcomes for families.	(1) FY07 7.7% FY08 6.2% FY09todate 8.2% Note #2 & 3 are a year behind in order to allow for 12 months of tracking. (2) FY06 10.82% FY07 11.21% FY08todate 11.33% (3) FY06 6.4% FY07 6.3% FY08todate 5.8%	The Safety Model results in improved safety related outcomes for children as measured by a reduction in: (1) The percentage of CPS substantiated victims with a subsequent supported finding within a six months. (2) The percent of home-based child clients who experience a subsequent supported CPS finding within 12 months of case closure. (3) The percent of foster children who experience a subsequent supported CPS finding within 12 months of case closure.	October 31, 2011	Staci Ghneim/Misty Butler/Sarah Houser Implementation Team
		A. Identify, convene, and support an Implementation Team responsible for implementing the Safety Model throughout all agency programs and services.				
		B. Review and revise the plan to be used to implement the model.				
		C. Develop and disseminate Practice Guidelines that will guide workers' use of the Safety Model.				
		D. Identify and suggest modifications to State rules and statutes that will ensure maximum benefit from use of the Safety Model.				
		E. Develop or enhance data collection tools that will enable workers to utilize the Safety Model as well as measure the effect of the Safety Model on client outcomes.				
		F. Package, distribute and communicate to agency partners and service providers the value of, and ways to utilize the Safety Model.				
		G. Integrate the application and use of the Safety Model into existing training and/or develop new training that will enable workers to effectively use elements of the				



STATE OF UTAH
Division of Child and Family Services
Child And Family Services Plan
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		Safety Model.				
Permanency, Safety	Casey Family Foundation, QICs, Faith-Based and community agencies that provide "non-traditional" support, Agency Partners, Service Providers	2. Develop new and enhance existing in-home services and community partnerships that will decrease threats of harm, decrease child vulnerability, increase protective capacity, and ultimately facilitate child safety.	34.9% of all DCFS cases in 2009 were in-home cases. (see attached chart)	Enhanced in-home services model and community partnerships result in better safety and permanency related outcomes for children while allowing them to remain in their own home as measured by the change in the trend of the ratio of in-home cases vs. foster care cases. (see attached chart)	October 31, 2012	Patti VanWagoner Paul Smith Brent Platt
		A. Better define the population eligible to receive in-home services from DCFS.				
		B. Develop a system of care/wrap-around model that will enable better coordination of services and resources offered to clients.				
		C. Utilize the Safety Model in in-home services determination of which families should receive services, what level of intensity the services should be, and what resources they may need.				
		D. Alter the case management information system as necessary to support changes to the in-home services model.				
		E. Identify and recommend modifications to State rules and statutes that will support the in-home services model.				
Permanency	Jim Casey Youth Opportunities Initiative, DJJS, Business and Professional Business Organizations, QICs, Agency Partners, Service Providers, Department of Health-Medicaid, Health Care, Insurers, DSPD, Court Improvement Project, UFCF, Foster Parents	3. Enhance Transition to Adult Living program and service delivery systems that support a youth's ability to achieve permanency and live independently.	(1) 1/1/06 53% 1/1/07 57% 1/1/08 54% 1/1/09 51% (2) See attached chart (3) Completion of NYTD requirements.	A broader array of services are available to youth and youth have better permanency outcomes., (1) Reduction in number of youth 14 and older in custody with goal of individualized permanency: (2) A greater proportion of children exiting custody at 14 and older will enter to reunification, adoption, or relative placement. The division will also be able to access quality data, for at least three-years after youth exit the child welfare system, that measures outcomes for youth that have exited foster care by implementing NYTD survey requirements.	October 31, 2014	Patti VanWagoner Jode Littlepage



		A. Evaluate, develop and implement an enhanced array of services available to youth in foster care that are age 14 and older.			October 31, 2014	Patti VanWagoner ode Littlepage
	National Resource Center for Child Welfare Data and Technology	B. Design and develop a data tracking system that will enable the division to track and evaluate services provided to all youth exiting foster care and survey the youth for their perceptions of their outcomes.			October 1, 2011	Navina Forsythe

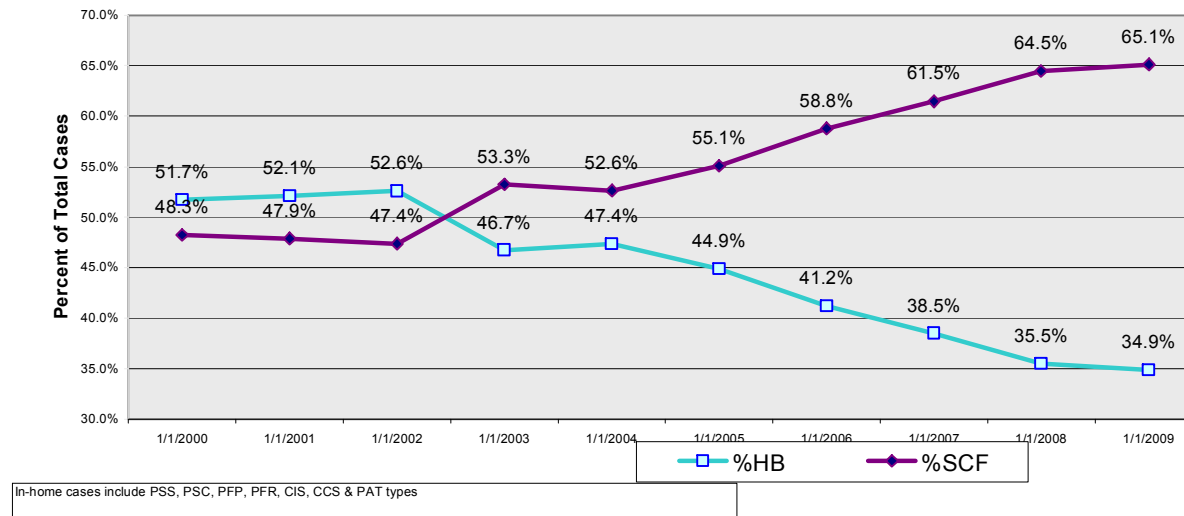
The Key Concepts of The Safety Model

The Triangles of Safety





**Proportion of Home Based and Foster Care Cases
2000 through 2009**



Percent of Youth 14 and Older Exiting Custody to Permanent Placements				
Closure Reason	FY06	FY07	FY08	FY09
Adoption	4.16%	4.19%	2.78%	2.60%
Custody/Guardianship to relative	12.30%	6.38%	7.19%	8.13%
Custody/Guardianship to foster parent/other non-	4.34%	3.28%	2.29%	2.60%
Reunified with parent/primary caretaker	31.83%	26.96%	32.84%	35.81%



Decision Making Process [1357.15 (r)]

The process to purchase goods and services from outside vendors, including the purchase of services from agencies that provide family support and other services, is outlined in Department of Administrative Services, Division of Finance procedures. Those procedures state:

- The Division of Purchasing establishes and maintains policies and procedures that cover statewide procurement.
- All departments and agencies must comply with all procurement policies and procedures established by the Division of Purchasing. The Director of Purchasing must approve in writing any departure from these policies and procedures.

In any instance, where a contract does not currently exist, purchases of more than \$5,000 must be placed through the Department of Administrative Services Division of Purchasing, which retains primary responsibility and control. With the following exceptions, all purchases over \$5,000 are made by DAS – Purchasing:

- The product or service is available through another state agency
- The product or service is covered by a Price Agreement
- Special delegation has been obtained from DAS – Purchasing;
- Emergency purchases
- Hotel accommodation or conference room purchases under \$50,000
- Architectural or engineering purchases under \$50,000
- Written permission from the Director of DAS – Purchasing.

DCFS Practice Guidelines Sections 050.1-5 deals specifically with the contracting process. Highlights of those policies indicate:

- The division will assure that Requests for Proposals (RFPs) are developed in a collaborative environment where all management staff with an interest in the RFP and/or resulting contract(s) have a chance to contribute to the development and review of the RFP.
- The state office or regional Program Manager, Grant Manager or administrator submitting the RFP will assure that all proposals received in response to that RFP are appropriately scored.
- A conflict of interest declaration must be made in any circumstance where any potential third party may perceive a bias or conflict in the judgment or interests of a reviewer selected to score a proposal.
- All contracts and amendments that achieve official, legal status will meet the highest level of accuracy, completeness, and adherence to State of Utah and DHS procurement policies and practices.
- In circumstances where a contract for services is sought, but there exists one, and only one, potential provider, the requesting individual or region may submit a sole source request.
- DCFS will complete a comprehensive audit of each contract at least once per fiscal year.



Consultation [1357.15 (l)] and Coordination [1357.15 (m)]

Program and Service Delivery Collaborations (45 CFR 1357.15(I))

The Division of Child and Family Services collaborates with a number of governmental, non-profit, faith-based, and other organizations to meet the needs of the children and families it serves. A sample of those agencies are listed below:

- The Adoption Exchange provides general and targeted recruitment of adoptive families, continuously updates and enhances their website that offers information and on-line resources to pre- and post-adoptive families, publishes a quarterly newsletter, and operates a lending library with more than 550 adoption related books, CDs, and audio and videotapes.
- Allies for Families provides support to children with mental illness or other special needs
- The Child Abuse and Neglect Council (CAN) helps improve prevention services across all program areas.
- The Children's Service Society in Salt Lake City provides parenting classes, child-care, and other resources to kinship families. It operates the "Grandfamilies" program that provides information and support to kin caregivers, advocates for grandparents and other relatives-as-parents, offers a bi-monthly support group called Friend 2Friend, conducts quarterly family building activities, and publishes a monthly newsletter.
- The Christmas Box House International provides move-in kits for youth exiting foster care.
- Contracted residential placement agencies provide care and treatment to children in out-of-home care who are in need of more intensive and individualized services.
- The Drug Endangered Children's Medical Advisory Team works to improve education programs (provided to professionals and the general community) relating to safety guidelines, response to, and treatment of victims who have been in contact with a methamphetamine laboratory.
- Family Support Centers provide statewide community-based support services including counseling, education, respite care services for families receiving in-home services, as well as crisis respite care services for families involved in the Adoption Program.
- The Indian Walk-In Center provides social services in a culturally appropriate manner to more than fifty separate tribes and other clients from numerous ethnic backgrounds
- The National Alliance for the Mentally Ill (NAMI) Utah provides advocacy and education for youth.
- The National Indian Child Welfare Association provides training and technical assistance related to Indian child welfare services, provides information regarding the needs and problems of Indian children, and helps improve community-based services that work to improve and promote public policies for Indian children.
- Other child placement agencies recruit and conduct assessments of foster and/or adoptive families.



- The Parent Center for Educational Needs provides support to children with mental illness or other special needs.
- The Presbyterian Church in Salt Lake City has developed a successful volunteer youth mentor program.
- Private foster care agencies provide longer respite care/residential services and parent support services.
- Public, private, and residential mental health agencies provide a continuum of mental health services to adoptive families and youth.
- The Utah Department of Health partners with DCFS by:
 - ☐ Assigning, to every DCFS office, a Fostering Healthy Children Nurse that monitors the health, dental, and mental health needs of children in out-of-home care.
 - ☐ Assisting in the coordination of Foster Care Medicaid.
 - ☐ Coordinating Medicaid adoption assistance.
 - ☐ Facilitating Medicaid mental health and rehabilitation services exempt from the Public Mental Health Plan.
 - ☐ Managing the Mutual-Consent Voluntary Adoption Registry.
 - ☐ Coordinating the Safe Relinquishment Statute and Adolescent Health committees.
 - ☐ Through the Baby Watch Early Intervention Program, provide initial assessments to determine whether children under 3 years of age and in DCFS custody are meeting developmental milestones.
 - ☐ Providing Medicaid coverage for youth after they age out of foster care.
 - ☐ Facilitating Medicaid mental health and rehabilitation services exempt from the Public Mental Health Plan for youth aging out of foster care.
- The State of Utah Department of Workforce Services manages the ETV program, conducts Individual Education Assessments, produces Individual Education Plans, as well as provides educational and employment training and placement services to clients.
- The State of Utah Division of Services for People with Disabilities coordinates services for eligible children with disabilities placed in out-of-home care and coordinates services for eligible adopted children with disabilities.
- The State of Utah Division of Substance Abuse and Mental Health:
 - ☐ Coordinates with community partners and agencies to establish an infrastructure for providing mental health and substance abuse services to children and adolescents and their families.
 - ☐ Provides treatment and counseling to children and youth in foster care.
- The State of Utah Office of Indian Education ensures that the education system supports and empowers Indian/Alaska Native students, embraces positive native values, and honors and affirms students past, present, and future contributions.
- The State of Utah Office of Education coordinates special education services for children with special needs and helps school districts, administrators, and teachers provide culturally sensitive services to children who have been adopted.
- The State of Utah Office of Licensing provides family assessments and licenses foster care and foster to adopt resource families, child placing foster and adoption agencies, residential treatment programs, and group homes.
- The Utah Coalition for Caregiver Support addresses issues for caregivers age 60 years or older.



- The Utah Indian Substance Abuse Coalition encourages professional interaction, supports problem-solving efforts, and provides a forum for discussion of substance abuse issues among AI/AN youth in Utah.
- The Utah Pride Center provides LGBTQ training for caseworkers and foster parents
- The Utah Sexual Violence Council supports and coordinates legal, treatment, and financial support services to victims of sexual violence.
- The Youth Service Center provides respite care services for families receiving in-home services as well as crisis respite care services for families receiving services from the Adoption Program.
- The Community Partnership to End Homeless Committee, which is supported by the State of Utah, Department of Community and Culture, Division of Housing and Community Development, hosts the Improving Discharge Planning Committee an interagency group that collaborates to prevent the discharge of clients to homelessness.
- The Housing Authority of Salt Lake City offers 50 housing vouchers to emancipating youth and is able to move youth to the top of their waiting list.
- The Utah Higher Education Assistance Authority Board of Directors offers “seed money” for scholarships through Utah Education Savings Plan for youth who have been in foster care and received TAL services to attend Weber State University, Utah Valley University, Southern Utah University, Salt Lake Community College, the College of Eastern Utah and Weber and Davis Applied Technical Centers.
- The University of Utah and Utah State University, through a contract with DCFS, provides advanced social work education for DCFS employees and persons preparing for employment in child welfare. There are also contracts with these universities to provide research within child welfare as part of evaluation of outcomes with various programs.

Partner Involvement in Recruitment, Training and Retention of Potential Foster Care, Adoption and Kinship Families

The Utah Foster Care Foundation (UFCF), through a contract with DCFS, recruits foster and adoptive families, assists in the recruitment of Native American foster care families, conducts preparation and ongoing training opportunities, and coordinates adoption and foster care cluster support groups throughout the State. They offer child development and/or grief and loss information and training to kinship families, provide service referrals to kin caregivers raising children in the foster care system, and engage in policy development and advocacy on behalf of kinship, foster care, and adoptive families. Additional services are provided by UfosterSuccess, which provides advocacy and foster care support, aid in matching targeted youth with mentors, and provides support to foster care alumni.

DCFS hosts a semi-monthly Partner's Meeting during which a deputy director meets with agency partners to plan for, and coordinate, the recruitment, training, and retention of resource families, including kinship caregivers.



Each region has quarterly meetings with representatives from the Utah Foster Care Foundation, Office of Licensing, Resource Family Consultants and region administration to coordinate recruitment, training and retention efforts within the local areas.

Semi-annual coordination meetings with the Deputy Director and Utah Foster Care Foundation administration are held to review trends, efforts, and outcomes of recruitment and training of potential resource families.

Partner Involvement in Review of Progress

DCFS continues to recruit and train individuals from partner agencies who help conduct Qualitative Case Reviews (QCR) and Case Process Reviews (CPR) that evaluate the quality of services provided by the division. Without the participation of these traditional and non-traditional partners, the agency would not be able to collect the quality or depth of information it currently accumulates.

Agencies That Assist in Conducting Qualitative Case Reviews (QCR) and Case Process Reviews (CPR)				
Adolescent Residential Treatment and Education Center	Adult Protective Services	Boy Scouts of America	Bureau of Internal Review and Audit	Carbon School District
Cedar City Police Department	Cedar City Quality Improvement Committee	Center for Women and Children	Children's Justice Center	Community Action Program
Congressman Cannon's Office	Court Appointed Special Advocate	DCFS-Retired	Department of Workforce Services	Department of Youth Corrections
DHS Executive Directors Office	DHS Executive Directors Office-Office of Public Guardian	DHS -Division of Juvenile Justice Services	DHS Office of Fiscal Operations	DHS-Bureau of Contract Management
DHS-Substance Abuse and Mental Health	Division of Juvenile Justice Services	Dove Center Domestic Violence Shelter	Eastern Quality Improvement Committee	Foster Care Citizen Review Board
Southwest Behavioral Health	Juvenile Court Probation - Roosevelt Utah	Guardian Ad-Litem	New Horizon's Domestic Violence Shelter	Northern Region Quality Improvement Committee
Office of the Attorney General	Southwest Quality Improvement Committee	Resource Families	University of Utah Medical Center	Paiute Tribe
Department of Health Fostering Healthy Children	Salt Lake County Division of Youth Services	Richfield Quality Improvement Committee	Utah Attorney General Children's Justice Center	Western Region Quality Improvement Committee
Utah Foster Care Foundation	Utah Youth Village	Walstad, Quinton-Burr Attorneys	Washington County School District	Utah Juvenile Court



Collaboration with Courts [Section 422(b)(13)]

Child and Family Services works collaboratively with the Court Improvement Project (CIP) to improve timeframes to permanency and improve the overall court process for children and families involved with child welfare. DCFS and the CIP also collaborate to ensure that appropriate IV-E language is included in court orders.

A report library is available to Juvenile Court Administrators that allows administrators to pull process and outcome results by district and judge. In an effort to promote better outcomes for children, administrators use these reports to assess the performance of individual judges as well as court systems.

DCFS has a process to inform the Court Administrator of changes to state and federal regulation and the effect of those changes on child welfare practice and resources. Discussions with the Attorney General's Office, Office of the Guardian Ad-Litem, and Juvenile Court judges continue and center on the implementation and impact of new state legislation.

In the State of Utah, Chief Justice Christina Durham continues to oversee the Initiative for Utah's Children in Foster Care (IOU). She formed the IOU committee, comprised of leaders in the public and private sectors, which address issues identified in a Pew Commission Report. Child and Family Services provides support to various IOU subcommittees including the subcommittee addressing community support needed by kin caregivers and the subcommittee addressing issues relating to youth in foster care transitioning to adult living.

Consultation and Coordination with Tribes

Intergovernmental Agreements currently exist with the Navajo Nation, and the Uinta/Ouray Ute tribe. Memorandums of Understanding are in place between DCFS and the Ibapah Goshute Indian tribe, Paiute Indian tribe, Northwestern Band of Shoshone tribe and Skull Valley Goshute tribe.

Native American Indian tribes meet quarterly during the DCFS sponsored State Indian Child Welfare Program Administrator Teleconference to discuss tribal issues, connect with other State ICWA specialists, discuss national statutes and policy, and collaborate to implement the Indian Child Welfare Act. In addition, Tribal organizations have been a part of the Transition to Adult Living Action Council, and cooperating with mental health and other community partners, develop plans for youth involvement in leadership opportunities.



Health Care Services Plan

Consultation with Physicians Medical Providers in Assessing Health and Wellbeing of Children

DCFS Practice Guideline Section 303.5 Health Care indicates that in most cases a child receiving out-of-home care must receive a Child Health Evaluation and Care (CHEC) exam within 30 days of removal or court ordered custody. In most cases the child's primary care physician (PCP) will perform the CHEC.

Section 303.5 also outlines procedures to be followed in providing children with dental exams, mental health assessments, development and social assessment, and immunizations. That section also outlines procedures to be followed for special medical situations including suspected drug use, evaluations for potential sexually transmitted diseases, pregnancy, abortion, and life saving medical treatment.

DCFS has a Letter of Agreement with the State of Utah Department of Health (DOH) that provides for Department of Health-Fostering Health Children staff to track, monitor, and evaluate health care services for children in DCFS custody. Department of Health staff work in conjunction with Community Health Partners to recruit and develop liaisons with health care providers and develop regional health resources for children, enter available health data into SAFE, provide consultation with or health education to DCFS staff, provide medical training to out-of-home care providers, and attend or send reports to Quality Improvement Committees.

Consultation with Medical Professionals

Schedule for Initial and Follow-up Health Screening

A medical provider sees children entering custody that are ill or have signs of abuse or neglect within 24 hours. All children receive a Well Child Check (WCC) by their medical home or primary care provider (PCP) within 30 days of custody. If the child does not have a medical home or PCP, one is assigned to them. The well child check schedule that DCFS follows is based on periodicity schedule recommendations made by the American Academy of Pediatrics. At 24 months the child is seen annually. Dental exams, the Mental Health Assessment (MHA) and the ASQ/ASQ-SE are completed within 60 days of custody. The MHA is then completed annually for children ages 5 and older. The ASQ/ASQ-SE is completed according to the schedule. Any referrals that are made from the WCC, Dental or MHA are tracked and are to be completed within 60 days unless there is an emergent need, or the physician or medical provider requests differently.



Percentage of Children that Received Their Initial Well Child Check Within 30 Days of Custody	
Fiscal Year	Percentage
FY'04	81%
FY'05	80%
FY'06	79%
FY'07	82%
FY'08	80%

Monitoring and Treating Health Needs

Children in out-of-home care are provided forms to be taken to ALL medical providers. These forms are returned to the R.N. assigned to the case. They are entered in the child's SAFE health record, which tracks referrals made and follow-ups needed. The nurse reviews each file to determine what procedures have been completed and what still needs to be done. As determined by the R.N., information may be provided in a Health Data Report to foster parents and/or medical providers.

Health Records (Including Electronic Health Records)

Data is stored in the SAFE database. When a child's placement changes, or the child returns home, the health data report is provided to the family. To augment the child's medical history, this report is taken to the medical provider who can then determine which medical providers the child has seen as well as use it to learn the child's family medical history. The provider can also use the document to identify current allergies, conditions, or medications the child is taking, ascertain immunizations the child has received, and determine what special equipment the child may need.

Continuity of Health Care

If at all possible, once entering custody, children remain with the same medical provider they had prior to entering state custody. If the child is placed at a location that prevents them from conveniently accessing that provider, the nurse helps coordinate the transfer of the child's case and medical records to a new provider. Nevertheless, the goal is to maintain the child in their medical home the entire time they are in custody.

Oversight of Prescription Medication (Including Psychotropic Medications)

All medications prescribed and taken by a child in custody are tracked in the child's SAFE medical history. Therefore, the medical provider has a complete history of current and completed medications taken by the child as well as medications discontinued for any reason. In addition, DCFS is able to pull a list of children on specific medications if there is a recall or concern. In these cases DCFS sends a letter and a copy of any FDA warning to the provider that prescribed the medication and asks that they review the medications with the client. The provider's review is returned to DCFS via the Health Visit Report form, which is used to update the case file as necessary.



Disaster Plan

The division developed its disaster plan with the understanding that preparedness and response start at the lowest possible level. In most cases, detailed disaster plans have been compiled at the regional level. The exception is in the Salt Lake Valley Region where plans have been developed for each individual office and compiled into a regional disaster plan.

The state office supports Region Directors and regional office operations and is the conduit for collecting and distributing information from regions to the Department of Human Services and other state and federal agencies. DCFS has coordinated its disaster plan with both department and state disaster and emergency operations plans.

For the purposes of this plan, an emergency is any unplanned event that prevents the division from providing critical services for a period of 24 hours or longer. Only the Division Director or his/her designee has the authority to declare an emergency and activate the Emergency Continuity and Contingency Plan and does so in coordination and collaboration with Regional Directors and the Department of Human Services Executive Director's Office.

Regional Directors are responsible for producing plans that respond to new child welfare cases, provide services in disaster areas, and identify, locate, and continue availability of services for children within their regions. Each region has procedures in place for contact of clients, providers, and partners within their region. In the case they cannot re-establish those contacts, they may request help from the state office who will either use other state or regional contacts to re-establish communications or, in coordination with the Department of Human Services Executive Director's Office, request assistance from the state's Emergency Operations Center (EOC), which may commit other state resources, or request national resources, that can assist in meeting regional needs. All coordination of services and the sharing of information with other states will be coordinated through the Department of Human Services and the state's EOC.

Regions will contact each of their staff and update staff on regional emergency operations and staff's roll in those operations. In the case where regional staff are not available or unable to communicate with other staff, the state office will utilize employee rosters held in the state office, human resource databases, and other state resources, to communication with region staff or assign staff from outside the region.

Most, if not all, essential records are stored on the SAFE database. In case of total hardware failure on the part of the system in the DHS administration building in Salt Lake the backup system in Richfield will be used. The Production database can be implemented at the Richfield site. All SAFE production databases on system are backed up to disk nightly.



Adoption Incentive Payments

Adoption Incentive Payments

Adoption Incentive funds will be used for a variety of projects that support client services under the in-home, foster care, child protective services, and adoption programs. For example, to support children and families, audio/visual equipment may be purchased for parent child visitation rooms. Additional notebook and laptop computers may be purchased for caseworkers that will use those resources to improve efficiency in documenting work with families. To train caseworkers on the use of the Safety Model, which will enable them to more effectively work with children and families, the division may purchase training supplies, and audio video equipment to support this training. Furnishings may be purchased to support field offices that provide direct foster care, adoption, in-home, and child protective services. If additional funding becomes available, those funds will be used to enhance the division's capacity to provide support to children and families under the in-home, foster care, adoption, child protective services, or child abuse prevention programs.



Staff Training, Research and Evaluation Process, and Technical Assistance Needed or Provided to Others [1357.15 (t)]

Training Plan

Training Activities to be Conducted by Utah Division of Child and Family Services

These training activities are conducted internally by trainers from the Utah Division of Child and Family Services and have been developed by the division's training staff, acquired through purchase or agreement with an outside entity, or created through a contract for development. Training staff located in the five regions of the state system will deliver these training activities.

Initial Training Program for New or Reassigned Employees							
Course Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
Practice Model 1- Engaging	Participants will learn how to effectively establish a relationship with children, parents, and other individuals involved in a child or family's case, as well as with those that are essential to resolving a child or family's child welfare related problems or issues.	State Office or Regional classroom	State Office or Regional Training Staff	24-30 hours	New Caseworkers	2-4 times per year in each region	Development of a case plan, Case review, Case management
Practice Model 2- Teaming	Participants will learn how to lead or become a member of a group that has the purpose of providing services or resources to children and families with critical needs.	State Office or Regional classroom	State Office or Regional Training Staff	24-30 hours	New Caseworkers	2-4 times per year in each region	Development of a case plan, Case review, Case management.
Practice Model 3- Assessing Module	Participants will learn how to gather information about family events that precipitate the need for child welfare services. Participants will also learn how to identify underlying causes that contribute to the family's problem or issue.	State Office or Regional classroom	State Office or Regional Training Staff	24-30 hours	New Caseworkers	2-4 times per year in each region	Development of a case plan, Case review, Case management.
Practice Model 4- Planning Module	Participants will learn skills necessary to tailor the planning process to each child and family team including the process used to design incremental steps that help move children and families to a better level of functioning.	State Office or Regional classroom	State Office or Regional Training Staff	24-30 hours	New Caseworkers	2-4 times per year in each region	Development of a case plan, Case review, Case management.
Practice Model 5- Intervening Module	Participants will learn skills that will enable them to intercede and redirect a child or family's actions or behaviors to one's that are more constructive, decrease risk, provide for safety, promote permanence, and establish wellbeing.	State Office or Regional classroom	State Office or Regional Training Staff	24-30 hours	New Caseworkers	2-4 times per year in each region	Development of a case plan, Case review, Case management.



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Professional Competency, Level A- Introduction to the Department and Division	Participants are introduced to the purpose and structure of the Department of Human Services and the Division of Child and Family Services. The course also presents an overview of training to be provided to new workers during their first year of employment.	State Office or Regional classroom	State Office or Regional Training Staff	18 hours	New Caseworkers	2-4 times per year in each region	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Professional Competency, Level B- Organization for Practice and Documentation	Participants will learn how to complete developmental screenings and support purposeful visiting. Participants will learn how to use and implement the NDDS screening tool as well as learn how to conduct and produce meaningful visits between a child and it's family.	State Office or Regional classroom	State Office or Regional Training Staff	18 hours	New Caseworkers	2-4 times per year in each region	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Child Abuse and Neglect	Participants will learn the definitions of child abuse and neglect, will learn what it looks like, and will learn how to intervene when they determine that child abuse or neglect is evident in cases they investigate.	State Office or Regional classroom	State Office or Regional Training Staff	18 hours	New caseworkers	2-4 times per year in each region	Referral to Services, Development of a case plan, Case review, Case management and supervision
Effects of Abuse/Neglect on Child Development (Core 103)	Participants will learn about factors that may lead a person to abuse or neglect a family member, will receive additional information on how to identify abuse and neglect, and will be able to identify the effect that abuse and neglect has on victims.	State Office or Regional classroom	State Office or Regional Training Staff	18 hours	New Caseworkers	2-4 times per year in each region	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Separation, Grief, and Loss (Core 104)	Participants will learn about the process and dynamics of child/family attachments. Participants will also learn about potential traumatic outcomes relating to separation and out-of-home placement experiences as well as techniques that will help minimize trauma experienced by children that require placement in an out-of-home setting.	State Office or Regional classroom	State Office or Regional Training Staff	18 hours	All new caseworkers	2-4 times per year in each region	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Legal-4th & 14th Amendments Web	Participants will study the legal history, including the 4th and 14th Amendments, that builds the legal foundation for today's child welfare system. Located at http://hsemployees.utah.gov/dcf/4thand14thAmendments.htm	DCFS Web site	Self Taught	2 hours	All Staff	As requested/Short-term	Preparation for and participation in judicial determinations



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Child Interviewing	Workers will learn how children share autobiographical information and the implications of that method of sharing on the interviewing process. Workers will review audio recordings and will use various child-interviewing examples to complete practice scenarios.	State Office or Regional classroom	State Office or Regional Training Staff	6 hours	All new caseworkers	2-4 times per year in each region	Referral to Services, Preparation and participation in judicial determinations, Placement of children, Development of a case plan, Case review, Case management and supervision
Provider Practice Model Training for Families and Partners	Participants will learn about DCFS Practice Model Principles and Skills and how they are used as employees provide services to the clients we serve.	DCFS Offices or Provider Offices	State Office or Regional Training Staff	32 hours annually	Current contracted provider agencies	Quarterly/ Short-term	Referral to Services, Development of a case plan, Case review, Case management and supervision
Estimated Total Cost of This Training Type	\$1,455,527.00						
Cost Allocation Methodology	Training activities for personnel employed by the State, including SACWIS training, are allocated according to Random Moment Sample strikes and are eligible for Federal matching at 75%. Training costs allocated according to the RMS are in activity PTR.A. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						

Ongoing In-Service Training

Course Title	Course Description	Setting/Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/Duration	Title IV-E Administrative Functions
Developmental Screening	Participants will review the NDDS screening tool and learn how to implement it in their work with families. Participants will also learn about early intervention programs in their area.	State Office or Regional classroom	State Office or Regional Training Staff	4 hours	CPS Staff. In the future will be applicable to all New Workers	1-4 times per year in each region/Short-term	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Domestic Violence Basic	Participants will identify state and federal law that pertain to domestic violence, will learn the definitions and characteristics of domestic violence, will study the cycle of abuse, and will learn skills used to intervene when serving victims, abusers, and their children. Participants will also receive information on community resources that serve or provide treatment to victims, abusers, and/or their children.	State Office or Regional classroom	State Office or Regional Training Staff	24 hours	All staff	1-4 times per year in each region/Short-term	Referral to Services



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Kinship Practice Web-Based Training	Participants will identify laws that affect kinship placements, learn about forms used when serving kinship families, as well as learn how to help families navigate through the service delivery system.	State Office or Regional classroom	State Office or Regional Training Staff	1 hour	All Kinship Workers	As requested/Short-term	Referral to Services, Placement of children, Development of a case plan, Case review, Case management and supervision
Substance Abuse Training Web-Based Training	Participants will explore their attitudes and beliefs about families with substance abuse problems and will receive information about the continuum of use, abuse, and addiction. They will learn how to identify signs of screening for substance abuse with all child welfare clients, discuss the needs and experiences of people who become addicted, identify substance abuse treatment options and identify the stages of behavior change. Participants will learn means to explore the process of recovery, identify the role of lapse and relapse for clients who have been addicted, discuss children's needs and experiences related to having a substance abusing parent, talk about ways to enhance case planning, learn the benefit of teaming with substance abuse treatment providers, and identify Internet resources from which they can obtain information.	Self Taught	Self Taught	6 hours	All Staff	As requested/Short-term	Referral to Service
TAL ACLSA	Participants will be introduced to the Ansell-Casey Life Skills Assessment (ACLSA) and will learn how to use that assessment as they form case plans for the youth they serve.	State Office or Regional classroom	State Office or Regional Training Staff	4 hours	All Permanency Workers	Quarterly in each region/ Short-term	Development of a case plan
Legal Aspects of Child Protection (Legal Core)	Participants will learn about the Juvenile Court process and what the caseworkers role is in this process. Participants will also learn the legal definitions for abuse, neglect, and dependency.	State Office or Regional classroom	Attorney General's	3+hours	New Caseworkers	2-4 times per year in each region/ Short-term	Preparation and participation in judicial determinations, Case review, Case management and supervision
Mentor Training	Participants will learn how to become mentors to new employees.	State Office or Regional classroom	State Office or Regional Training Staff	7 hours	All Supervisors. By Invitation to Experienced Caseworkers	Statewide Quarterly/ Short-term	Referral to Services, Preparation and participation in judicial determinations, Placement of children, Development of a case plan, Case review, Case management and supervision



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Supervisor Training	Participants will learn about the performance management Job Performance Factors Performance Planning Ongoing Practice Review, Supervisor Finishing Touches Review, Case Process Review, Quarterly Performance Evaluation, Annual Performance Evaluation, as well as the process to document and provide recognition and rewards for employee progress. Participants will also come to understand the purpose of various federal statutes including ASFA, MEPA/IEPA, ICWA, as well as requirements outlined in those statutes including those relating to permanency goals, concurrent planning, documenting permanency goals, and concurrent planning practice supervision.	State Office or Regional classroom	State Office or Regional Training Staff	30 hours	All Supervisors and/or Administrators or by Invitation to Experienced Caseworkers	1-4 times per year in each region/ Short-term	Referral to Services, Preparation and participation in judicial determinations, Placement of children, Development of a case plan, Case review, Case management and supervision
Advanced Intensive Sex Abuse Interview Skills	Participants build skills that will help them effectively interview children alleged to be victims of child abuse or neglect. They will develop skills that will enable them to conduct interviews in a manner that will decrease the traumatic effect of the interview on the child.	State Office or Regional classroom	State Office or Regional Training Staff	2-4 days	CPS staff, Law Enforcement	1-2 times per year/ Short-term	Case management, Case review
Audio-Import	Participants will learn about law relating to the need to keep audio records confidential. They will also learn how to import audio recordings of case information into the SAFE data collection system.	State Office or Regional classroom	State Office or Regional Training Staff	2+ hours	CPS Staff	2-4 times per year in each region/ Short-term	Preparation and participation in judicial determinations, Development of a case plan, Case review, Case management and supervision
ICWA Training Web-Based Training	Participants will learn the main components of the Indian Child Welfare Act including its definitions and the rationale for complying with this legislation. Participants will also learn how cultural frameworks impact interactions with people of other cultures as well as how those cultural frameworks impact the worker's decision making.	DCFS Web-site	Self Taught	2 hours	All staff	As needed/ Short-term	Placement of Children
Train the Trainer	Participants learn and practice skills that will allow them to provide more effective training to workers, contacted providers and others receiving agency training. Training may include mentoring of new trainers teaching regularly scheduled courses.	State Office or Regional classroom	Experienced Trainers	6 hours	New trainers and experienced trainers teaching new subject material.	As needed/ Short-term	Referral to Services, Development of a case plan, Case review, Case management and supervision
Estimated Total Cost of This Training Type	\$405,000.00						
Cost Allocation Methodology	Training activities for personnel employed by the State, including SACWIS training, are allocated according to RMS strikes and are eligible for Federal matching at 75%. Training costs allocated according to the RMS are in activity PTR. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						



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SAFE (SACWIS) Training							
Course Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
SAFE Training for New Employees	Participants will receive an introduction to the SAFE database management system. Participants will learn how to access and log into SAFE, will learn about components in SAFE including tabs, screens, reports, and be introduced to the various database modules.	State Office or Regional classroom	SAFE Trainer	12 hours	All Staff	Monthly in each region/ Short-term	Case management, Data entry and collection
SAFE Training for Special Groups	Participants will receive an introduction to the SAFE database management system. Participants will learn how to access and log into SAFE, will learn about components in SAFE including tabs, screens, reports, and be introduced to the various database modules.	State Office or Regional classroom	SAFE Trainer	12 hours	All Staff	Monthly in each region/ Short-term	Case management, Data entry and collection
SAFE New Release Training	Participants will receive updates and learn how to use new SAFE database modules.	State Office or Regional classroom	SAFE Trainer	Variable	All Staff	As needed/ Short-term	Case Management, Data entry and collection
SAFE Train the Trainer	Participants learn and practice skills that will allow them to provide more effective SAFE training to workers, contacted providers and others receiving agency training. Training may include mentoring of new trainers teaching regularly scheduled courses.	State Office or Regional classroom	Experienced SAFE Trainers	6 hours	New trainers and experienced trainers providing training on new SAFE modules.	As needed/Short-term	Data Entry, Referral to Services, Development of a case plan, Case review, Case management and supervision
Estimated Total Cost This Training Type	\$90,000						
Cost Allocation Methodology	Training costs for the SACWIS system are allocated according to the RMS percentage, with Title IV-E federal matching for allowable costs at 75%, except that all strikes for the Adoption and Out-of-home categories allocated to Title IV-E without applying the penetration rate. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						



Conferences and Summits							
Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
Support Staff Conference	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	State Office or Regional classroom, Outside facilities if needed.	Internal and guest speakers	1 day	State and Regional Support Staff	Annually/ Short-Term	Case Management, Data entry and collection
Supervisor Summit	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	State Office or Regional classroom, Outside facilities if needed.	Internal and guest speakers	1 day	State and Regional supervisors	Annually/ Short-Term	Case Management, Data entry and collection
Regional Summit	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	State Office or Regional classroom, Outside facilities if needed.	Internal and guest speakers	1 day	Regional staff	Annually/ Short-Term	Case Management, Data entry and collection
Program Summit	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	State Office or Regional classroom, Outside facilities if needed.	Internal and guest speakers	1 day	Program related staff	Annually/ Short-Term	Case Management, Data entry and collection
Estimated Total Cost of This Training Type	\$60,000.00						
Cost Allocation Methodology	Training activities for personnel employed by the State, including SACWIS training, are allocated according to RMS strikes and are eligible for Federal matching at 75%. Training costs allocated according to the RMS are in activity PTR. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						



IV-E Training for Support Staff							
Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/Dura tion	Title IV-E Administrative Functions
IV-E Eligibility New Eligibility Worker Training	New Eligibility workers will be introduced to Title IV-E legislation, rules, regulations, policies and procedures that they will use to determine if a child in out-of-home care is qualified for Title IV-E benefits, individual IV-E entitlements for a qualified child in out-of-home care. Workers will demonstrate the ability to determine if a child meets Initial Title IV-E Eligibility and Title IV-E Reimbursability requirements.	DHS Administrative Office	IV-E/Medicaid Specialist	7 hours	New IV-E Eligibility workers	6-10 days each year/short-term	Title IV-E Eligibility Determination
IV-E Eligibility Ongoing eligibility worker in- service training	Experienced IV-E eligibility workers will receive information about new or updated legislation, policy, and procedure that will help them determine if a child in out-of-home care is qualified for Title IV-E benefits.	DHS Administrative Office	IV-E/Medicaid Specialist	7 hours	All DHS Eligibility Staff	6-10 days each year/short-term	Title IV-E Eligibility Determination
Estimated Total Cost of This Training Type	\$6,000.00						
Cost Allocation Methodology	Training activities for Title IV-E eligibility for foster care or adoption are eligible for 75% Title IV-E matching with no penetration rate being applied. Title IV-E eligibility training costs are in activity PT4E. These costs will be proportionally split between foster care and adoption based upon total number of clients in the two programs. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						

Training Conducted by Outside Experts for Employees of the Division of Child and Family Services

Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
Child Welfare Institute	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	Outside conference center	Internal and guest speakers	2 days	All staff	Annually/Short- Term	Data entry and collection, Referral to Services, Development of a case plan, Case review, Case management and supervision



Special Workshops	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention.	Outside conference center	Internal and guest speakers	1 day	All staff	Annually/Short-Term	Data entry and collection, Referral to Services, Development of a case plan, Case review, Case management and supervision
Contract or Special Arrangement	Participants will attend a variety of workshops that will discuss current child welfare issues, identify new practice guidelines, principles or skills, and address new treatment or service delivery programs, services or models that may help workers address needs of their clients. Outside presenters may also speak on special matters relating to the work environment, employee motivation, or recruitment and retention	Outside conference center	Internal and guest speakers	1 day	All staff	Annually/Short-Term	Data entry and collection, Referral to Services, Development of a case plan, Case review, Case management and supervision
Home Study Training	Participants will learn about this home study methodology designed to evaluate families for adoption, foster care licensure, concurrent planning, and relative placement. The methodology is built upon solid social work practice values that stress the importance of respectfully engaging families in a strength based, mutual evaluation process that strives to select families in, not out.	State Office classroom	Consortium for Children	2 days Additional ½ day for supervisors	DCFS, OL, ICPC and partner agency staff that conduct home studies for potential licensed foster or foster-to-adopt families	Bi-annually	Placement of Children
Estimated Total Cost of This Training Type	\$212,500.00						
Cost Allocation Methodology	Training activities for personnel employed by the State, including SACWIS training, are allocated according to Random Moment Sample (RMS) strikes and are eligible for Federal matching at 75%. Training costs allocated according to the RMS are in activity PTR. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						

Long Term Training for Persons Employed by or Preparing for Employment

The Division contracts with both the University of Utah in Salt Lake City and Utah State University in Logan, Utah to conduct training programs for persons employed by or preparing for employment with the Division of Child and Family Services or Division of Youth Corrections (agencies that participate in Title IV-E programs under the umbrella IV-E agency of the Department of Human Services). This training includes a Bachelor of Social Work and a Master of Social Work program. The Bachelor of Social Work program participants are seniors in the program and prospective employees who complete an internship with the Utah Division of Child and Family Services. The Master of Social Work program participants are employees of the Utah Division of Child and Family Services. Training provided by both Universities are oriented to preparation for work in public agencies and in child welfare in particular. These programs will be considered to be in place for the scope of the five-year plan.



STATE OF UTAH
Division of Child and Family Services
Child And Family Services Plan
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June 30, 2009

Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/Dura- tion	Title IV-E Administrative Functions
Bachelor of Social Work: Senior Year Program	Bachelors level Social Work curriculum includes courses on Social Work as a Profession, Social Work Practice, Human Behavior, Communication Skills, Professional Ethics, Diversity and Cultural Understanding, and Social Welfare Policy and Services. The curriculum also includes a field practicum where knowledge and skills are applied.	University of Utah, College of Social Work University of Utah, College of Social Work	BSW Program Faculty	Two semesters of full time work. The first semester is course work (12 semester hours) and the second is the practicum (480 hours).	Students accepted to the BSW program for their senior year who commit to employment with DCFS.	Annually/ Long-Term	Referral to Services, Preparation and participation in judicial determinations, Placement of children, Development of a case plan, Case review, Case management and supervision
Master of Social Work: Year One General Area and Year Two Public Domain Area-Distance Learning and Day Program	Master's level Social Work curriculum includes courses on Social Work Practice, Human Behavior, Communication Skills, Professional Ethics, Diversity and Cultural Understanding, Social Welfare Policy and Services, Social Welfare Research, Clinical Counseling and Treatment Programs Services and Skills, and includes a field practicum where knowledge and skills are applied.	University of Utah, College of Social Work University of Utah, College of Social Work	MSW Program Faculty	Four to Five semesters	Students that work for DCFS or DYC.	Annually/ Long-Term	Referral to Services, Preparation and participation in judicial determinations, Placement of children, Development of a case plan, Case review, Case management and supervision
Estimated Total Cost of This Training Type	\$1,919,451.00						
Cost Allocation Methodology	P4UU includes costs for a contract with the University of Utah for training of employees and individuals preparing for employment, including a graduate degree program. The University bills the Division for the Title IV-E eligible portion of the cost less state match. For training activities, the federal matching rate of 75% is utilized in accordance with 45 CFR 1356.60. DCFS claims 100% Title IV-E reimbursement for the portion of costs billed. The University has the non-eligible and state match general fund costs in its accounting records and DCFS maintains the Title IV-E costs in the Division's accounting records. The Division collects Title IV-E reimbursement and passes the revenue through to the University. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.) The university determines the proportion of costs attributable to Title IV-E by proportionally reducing the allowable cost pool according to the following factors: (1) proportion of curriculum that addresses IV-E allowable activities; (2) proportion of students receiving IV-E stipends to total students; (3) proportion of school costs attributable to each of the programs serving persons employed by or preparing for employment with DCFS; and (4) Title IV-E foster and adoptive combined penetration rate.						



Foster and Adoptive Parent Training

This training is conducted through a contract with the Utah Foster Care Foundation, which conducts training required for licensure of potential adoptive and foster parents. UFCF also provides 12 hours of in-service training each year. Foster parents are required to attend this training in order to retain their licensure.

Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
Foster and Adoptive Parent Training	Participants will receive training that will qualify them to become licensed foster parents. Training includes an orientation to foster parenting; licensing and medical policy; child abuse and neglect; the impact of abuse on development; attachment, grief, and loss; discipline and stress management; adoption and permanency; as well as cultural issues relating to the primary family.	UFCF offices, Community sites throughout the state	Utah Foster Care Foundation	32 hours	Current and potential foster, foster to adopt, and adoptive parents	Monthly/ Short-Term	Recruitment and licensing of foster homes and institutions
Foster and Adoptive Parent In-Service	Participants receive the hours of annual training required to retain their foster care license. A myriad of courses are offered including those on Emotionally Healthy Parenting, Skills Development, Allegation Prevention and Response, Drug Recognition, Economic Health, and Legal Issues relating to foster care.	UFCF offices, Community sites throughout the state	Utah Foster Care Foundation	12 hours annually	Current foster, foster to adopt, and adoptive parents	Monthly/ Short-Term	Recruitment and licensing of foster homes and institutions
Estimated Total Cost of This Training Type	\$826,875.00						
Cost Allocation Methodology	Combined training activities for foster and adoptive parents are eligible for 75% Title IV-E matching funds after a combined penetration rate (defined in Section XIII) has been applied to determine the portion benefiting Title IV-E. Training costs for combined foster/adoptive training are in activity PBTA. (See Utah Department of Human Services Cost Allocation Plan, Section VIII.)						



Short-Term Training of Relative Guardians

This is existing or new training provided by partner agencies providing short-term training to relative guardians as recently authorized under P.L. 110-331.

Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours/days	Audience	Frequency/ Duration	Title IV-E Administrative Functions
Utah State Guardian Ad Litem Relative Guardian Training	Participants will identify and discuss new legislation, regulations, policies, and procedures that relate to the needs of relative guardians and programs and services provided to them.	GAL Offices, Other state government and partner agency classrooms	GAL staff	Variable	Guardian Ad Litem Staff, Affiliated Groups and Organizations, Partners, Services Providers	Variable/short-term	Relative Guardianship
Utah State Attorney Generals-Child Welfare Division Relative Guardian Training	Participants will identify and discuss new legislation, regulations, policies, and procedures that relate to the needs of relative guardians and programs and services provided to them	Offices of the Attorney General, Other state government and partner agency classrooms	Staff of the Office of the Attorney General	Variable	Staff of the Attorney General's Office, Affiliated Groups and Organizations, Partners, Services Providers	Variable/short-term	Relative Guardianship
Court Relative Guardian Training	Participants will identify and discuss new legislation, regulations, policies, and procedures that relate to the needs of relative guardians and programs and services provided to them.	Court Offices, Other state government and partner agency classrooms	Court staff	Variable	Guardian Ad Litem Staff, Affiliated Groups and Organizations, Partners and Services Providers	Variable/short-term	Relative Guardianship
Estimated Total Cost of This Training Type	\$250,000.00						
Cost Allocation Methodology	ACYF-CB-PI-09-06 sets the FY 2010 Title IV-E matching funds FFP rate of Federal reimbursement at 60% for this training type.						



Training Under Development

In addition to training being currently offered, The Professional Development Team has identified the following courses as priorities and will be developed, tested and implemented during the period covered in this five-year plan. DCFS will include allowable training costs in future submissions of its training plan.

Title	Course Description	Setting/ Venue	Proposed Provider	Approximate Number of hours /days	Audience	Frequency/Duration	Title IV-E Administrative Functions
Year 1-2							
Removal of children	This training will heighten a worker's awareness of a child's anxiety, fear and trauma when facing removal from the home of their parents or caretaker. It will provide staff tangible suggestions about how to make the process less traumatic for children.	State Office or Regional classroom	State Office or Regional Training Staff	To be determined	Direct service staff, supervisors and administrators	To be determined/ Short-term	Referral to Services, Development of a case plan, Case review, Case management and supervision
Year 2-3							
Secondary Trauma	Participants will examine their reactions to stressful or traumatic cases they are assigned. Participants will learn about Post-Traumatic Stress Disorder (PTSD) and will develop skills that will enable them to deal with stressful situations in a positive manner.	State Office or Regional classroom	State Office or Regional Training Staff	To be determined	CPS Staff, Experienced Caseworkers	To be determined/ Short-term	Case review, Case management and supervision
Brain Trauma	Participants will learn about potential causes of and the effects that brain trauma has on the children or adults they may serve. Participants will also gain skills that will enable them to more effectively serve clients with traumatic brain injuries.	State Office or Regional classroom	State Office or Regional Training Staff	To be determined	Experienced Caseworkers	To be determined/ Short-term	Case review, Case management and supervision
Year 3-5							
Foundations for Youth: Supporting Foster Parents web training	Information on adolescent development; impact of abuse and neglect, including trauma issues; adolescent behavior, normal and trauma related; engaging with youth; intervening with youth; planning with youth, the ACLSA; supporting youth through the transition to adulthood; and how to support foster parents in all these areas.	Self Taught	Self Taught	Approximately 1 hour	Caseworkers that work with youth as well as division administrators that supervise those caseworkers	To be determined/ Short-term	Referral to Services, Development of a case plan, Case review, Case management and supervision
Newborn Exposure Cases	Participants will learn about problems faced by this vulnerable population and will discuss what issues and needs to consider when developing a safety plan.	State Office or Regional classroom	State Office or Regional Training Staff	To be determined	Direct service staff, supervisors and administrators	To be determined/ Short-term	Development of a case plan



Research Activities

Following is a synopsis of ongoing research activities that will be supported by the division into FY 2010.

- Trudi Moore, a DSW candidate, is conducting research for her dissertation designed to increase understanding of medically fragile children served by Utah's child welfare system. This study will attempt to identify factors associated with positive and negative health and child welfare outcomes. Findings from this study will be used by DCFS to meet the needs of the growing population of medically fragile children it serves.
- Dr. Derrik Tollefson is conducting a study that will utilize de-identified archival data housed in DCFS and JJS databases to explore foster children's involvement in the juvenile justice system before, during, and after their time in state custody. The study's primary objective is to increase understanding of the delinquency patterns of foster children.
- Kristine Campbell is undertaking a recruitment pilot study, a longitudinal study of families returning home after a first-time DCFS finding of child physical abuse.
- Dr. Derrik Tollefson is conducting a study that will ask DCFS supervisors to rate their employees who participate in the Utah Child Welfare Traineeship at the Utah State University. Supervisors rate employees on a number of child welfare practice competencies via a questionnaire that will be administered electronically via Survey Monkey.
- Dr. Susan C. Egbert is conducting a survey that will assess adoptive families awareness of, ability to access and use, as well as satisfaction with post-adoption services provided by DCFS and other community programs. It will also attempt to have families prioritize their current needs.
- Jini Roby is conducting a study comparing identity development in youth in foster care (that are approaching emancipation from foster care) with identity development in their non-foster care counterparts. In collaboration with DCFS, researchers will recruit participants from in and around Utah and Salt Lake counties. The foster care and non-foster care youth will be administered structured interviews separately. Each youth will be interviewed one time for 45 minutes and will be asked to answer both closed and open-ended questions relating to their familial interactions, interaction with the child welfare system, behaviors, and readiness for independence.
- Kathy Franchek-Roa is conducting a study designed to evaluate the overall health and psychological wellbeing of children who have been exposed to maternal intimate partner violence to determine if the magnitude of the negative effect on children is related to the timing, severity of violence exposure and length of exposure to maternal intimate partner violence. The study will utilize the Child Behavior Checklist (CBCL), a standardized assessment of a child's behavior and social competencies. The study will also utilize a questionnaire to determine age of the child at the time of violence exposure, length of exposure, and severity of exposure. It will contain five questions from the Abuse Assessment Screen. The 16 domestic violence shelters in Utah will be invited to participate in the study.



Technical Assistance Provided to Others

The Information, Evaluation, and Research Team provides community partners with demographic and outcome information as well as helps prepare data that community partners use to assess the need for new services. This data also helps partners prepare applications for grants or awards that support the delivery of new and existing services. Additionally, the Information, Evaluation and Research Team develops and generates reports from SAFE for the Office of Recovery Services, the Office of Services Review, and the Office of Licensing. These reports help those offices coordinate their programs and services with those provided by DCFS. That team also develops report libraries for the courts and the Utah Foster Care Foundation.

Program Managers work with community partners and provide information, data, and support as well as help develop child welfare and domestic violence service delivery strategies and implementation plans. Program Administrators sit as working members on the Initiative on Utah's Children in Foster Care (IOU), sponsored by Chief Justice Christina Durham and participate on committees including those addressing the need for support for youth in foster care (IOU TAL Subcommittee), developing supports for kinship caregivers (IOU Kinship Subcommittee), and identifying educational needs of children in DCFS or JJS custody (IOU Education Subcommittee).

Regions provide assistance to community organizations. Local leaders, community members, legislators, and educators meet with local caseworkers and supervisors during "Immersion Days" and learn about how DCFS provides services to families.

Technical Assistance Needed to Implement New Federal Requirements

The National Resource Center for Child Welfare Data and Technology is working with the division on the implementation of the National Youth in Transition Database. The division also received technical assistance from the NRC for Child Protection that helped with the development of our Safety Decision-Making Model to be used by all programs and services.

As the division implements the Safety Model, additional assistance may be requested from the National Resource Center on Child Maltreatment. As it develops new and enhances existing in-home services and community partnerships the division may also request assistance from Casey Family Programs and faith-based community agencies that provide "non-traditional" support. Finally, the division may request assistance from the Jim Casey Youth Opportunities Initiative as well as businesses and professional business organizations as it strives to enhance programs and services delivered to youth transitioning from foster care.



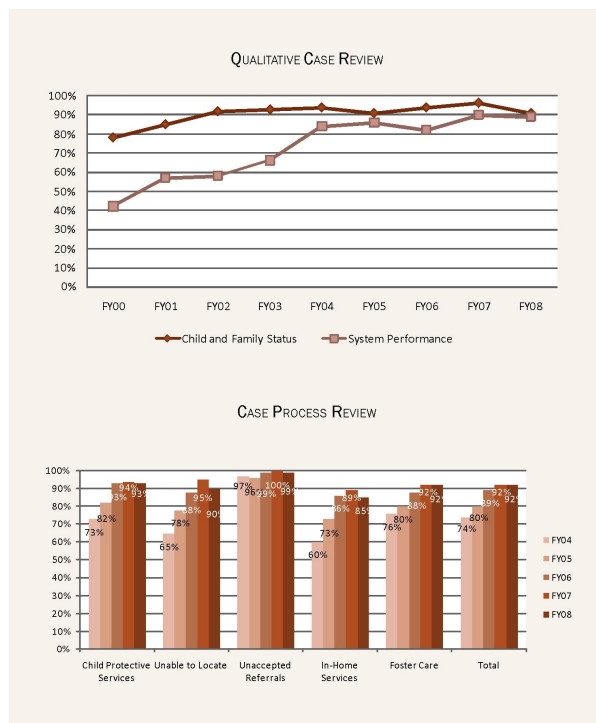
Quality Assurance System [45 CRF 1357.15(u)]

Data Management

The division's automated child welfare information system, known as SAFE, became fully operational in September 2001. Caseworkers, health care staff, support staff, and supervisors are required to use SAFE for all case management functions.

Workers collect and enter data directly into SAFE, which automatically fills forms and displays data in the appropriate SAFE window. Staff also record placements and one-time payments in SAFE, which carries out real-time updates to USSDS. SAFE provides workers with prompts and multiple views of policy-based items that need to be completed within a specific time frame. A worker can view all tasks currently due, items due in the next 30 days, or those due the following month. They can also examine the history of the case and can view the due date for each action item up to one year in the future.

SAFE interfaces with other state agency information systems such as the Public Assistance Case Management Information System (PACMIS) and the Office of Recovery Services Information System (ORSIS) as well as the Unified Social Services Delivery System (USSDS), which updates provider information nightly.



Quality Improvement and Evaluation

Through research, analysis, strategic planning, and personal interaction with staff, the Program and Practice Improvement Team uses its expertise to implement and support child welfare best practices at all levels of the organization. Specific responsibilities of team include implementing law into practice, providing support to workers and supervisors, and providing evidence to support changes to practice policies, guidelines, and administrative rules.

The Practice and Program Improvement Team participates in regional quality improvement activities and uses SAFE data reports, in addition to face-to-face meetings with region administrators, supervisors, and front line workers to



determine what support, training and mentoring is needed to improve outcomes. SAFE data reports are regularly pulled for all required activities and are used to monitor compliance with policy.

The team evaluates and reviews results obtained from Case Process Reviews (CPR) and Qualitative Case Reviews (QCR) conducted jointly with the Office of Services Review (OSR), also a part of the Department of Human Services.

The CPR provides a snapshot of how well the division documents case management, looks for evidence that the worker has performed required activities within prescribed timeframes, and measures a workers compliance with the Practice Model. The CPR results in quantitative data regarding the completion of a required task.

A statistically significant sample of cases in each program area is used to review case process outcomes during the CPR. Program areas evaluated include:

- Child Protection-In addition to CPS cases in general, this program area includes cohorts of priority one referrals, medical neglect referrals, shelter cases, unable to locate referrals, and unaccepted referrals.
- Home-Based/In-Home Services-This program area includes family preservation services, voluntary protective services, and court-ordered protective supervision services
- Foster Care Services-This program area includes families with children in out-of-home care due to abuse, neglect, or dependency.

Performance goals are set at 85% or 90% for CPS cases and 85% for all other program areas.

The Qualitative Case Review (QCR) is the method of evaluation used to assess the status of children and families served by the division and the performance of the child welfare system. The QCR, conducted annually in each region, is similar to the federal review in that it is outcomes based and measures outcomes related to child safety, permanency, and wellbeing.

Specifically, the QCR examines:

- The participation of the child and family in the administration of the case
- The organization and functioning of the Child and Family Team (CFT)
- The ability of the CFT to assess a family's strengths as well as the needs of the family
- The teams ability to conduct assessments and develop case plans that employ a long-term view of services needed
- Services put in place to enable the family to live safely without supervision from child welfare
- The implementation of the Child and Family Plan (CFP)
- Caregiver support and satisfaction.

Approximately 24 cases are reviewed in each region. The QCR team also interviews stakeholders including the child, parents, service providers, legal partners, and other community partners to help region administration identify and address systemic barriers.



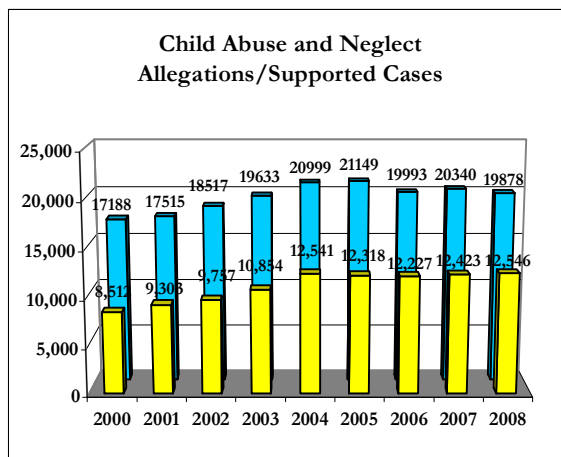
Two reviewers examine each case. One reviewer must be certified. The other reviewer acts as a “shadow” and can be a community partner, DCFS employee, or an employee of other departments within Human Services.

Scores are generated that relate to Child and Family Status and System Performance. Results are presented at a debriefing where reviewers share their findings and discuss cases with other reviewers, supervisors, and region administration. A case story is then written explaining how each score was calculated.

Finally, the Trend Analysis Committee analyzes results from both the CPR and QCR. Frontline workers and state program specialists sit on this committee, review and interpret data, and then issue recommendations to the Administrative Team. That team develops plans to improve practice, guidelines, policies and procedures. Results of these reviews are also presented to the State and Regional Quality Improvement Committees that review results and recommend systemic changes.

SECTION II

Child Abuse Prevention and Treatment Act (CAPTA) Plan 2010-2014



Population Served

The mission of the Child Protective Services Program is to prevent the occurrence or recurrence of child abuse, neglect, dependency, or exploitation of children in the State of Utah. Utah Administrative Rule R512-201-3 states “Children who are the subject of a referral for child abuse, neglect, or dependency qualify for investigation services.” Utah Administrative Rule R512-202-2, defines abuse and neglect as:

“Abuse

1. Child endangerment includes driving under the influence with children in the vehicle; homes where there are lab paraphernalia, chemicals for manufacturing illegal drugs, access to illegal drugs, distribution of illegal drugs in the presence of a child, or loaded weapons within the reach of the child, or exposure to pornography; giving children illegal drugs or substances, alcohol, tobacco or non-prescribed/not recommended medications for that child; involving a child in the commission of crimes, such as shoplifting; or other circumstances endangering a child.



2. Domestic Violence Related Child Abuse includes a potential for or actual injury to a child during a domestic violence episode; or a violent physical and/or verbal altercation between adults, in the presence a child.
3. Emotional abuse includes general emotional abuse, such as a pattern or severe isolated incident of demeaning or derogatory remarks about the child or other family member in the presence of the child, perception of or actual threatened harm, corrupting or exploiting the child, multiple false reports to CPS, terrorizing, spurning (hostile rejecting), denying emotional responsiveness, and isolating.
4. Providing material harmful to a child.
5. Physical abuse includes physical abuse, general, excluding any physical abuse as defined herein, including (but not limited to) non-accidental injury to a child that may or may not be visible, unexplained injuries to an infant or toddler, unexplained injuries to a disabled or non-verbal child.
6. Fetal exposure to alcohol or other substances.
7. Fetal addiction to alcohol or other harmful substances.
8. Pediatric Condition Falsification (formerly known as Munchausen's Syndrome by Proxy).

Neglect

1. Medical neglect is based on the opinion of the child's primary care physician or other licensed medical professional.
2. Baby Doe (congenital birth defect that parents or caregiver declines to treat).
3. Failure to thrive, based on the opinion of the child's primary care physician or other licensed medical professional.
4. Neglect of child's physical health.
5. Neglect of child's psychological health.
6. Neglect of child's dental health.
7. Pediatric Condition Falsification (formerly known as: Munchausen's Syndrome by Proxy).
8. Physical neglect.
9. Sibling or child at risk.
10. Educational neglect occurs when a child has been frequently absent from school without good cause or that the parent has failed to cooperate with school authorities in a reasonable manner, Sections 62A-4a-101(14)(a)(iv), 62A-4a-101(14)(b), and 78-3a-316.
11. Failure to protect.
12. Non-supervision.
13. Abandonment.
14. Environmental neglect includes physical neglect of the environment such as absence of utilities, home conditions below minimum standards, hazards, etc.
15. Dependency. A child who is homeless or without proper care through no fault of the child's parent, guardian, or custodian, and institutionalization of a parent or guardian who has not or cannot arrange for safe and appropriate care for the child."



Program Areas Selected for Improvement

CAPTA Section 106(a) lists 14 program areas. From that list, DCFS has selected the following for improvement and intends to complete the activities described.

Program Area 1-Reevaluate processes, procedures, and guidelines related to the intake, assessment, screening, and investigation of reports of child abuse and neglect.

Proposed Activity: Develop guidelines and procedures to assure consistency of intake practice.

Proposed Activity: Assess alternative/differential response systems and models and evaluate the feasibility of using those models to intervene with and provide services to families in a more supportive way.

Program Area 4-Enhance the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols.

Proposed Activity: Implement the Safety Model into existing agency programs and services and assure that the Safety Model is used through the life of the case (Refer to Section 1 Goals and Objectives [Safety Decision Making](#)).

Program Area 6-Develop, Strengthen, and Facilitate Training including training regarding research-based strategies to promote collaboration with families; training regarding the legal duties of such individuals; and, personal safety training for caseworkers.

Proposed Activity: Establish specialized and program specific CPS training.

Services to be Delivered Utilizing CAPTA Funding

Child Protective Services (CPS) provides for the receipt of reports of possible abuse, neglect, or dependency, the investigation of such reports, determination of initial risk to a child, determination of need for ongoing in-home services or referral, and provision of shelter care when removal of a child from home is necessary. Specific activities performed by CPS caseworkers include:

- Intake and processing of initial allegations of abuse and neglect
- Completing assessments
- Conducting interviews
- Contributing to team consultations/staffings
- Coordinating services to children and caregivers including ensuring timely medical attention is provided when a child has experienced trauma caused from severe maltreatment, serious physical injury, recent sexual abuse, fetal addiction, medical neglect, or any exposure to a hazardous environment, including those involving illegal drug/chemical production.
- Performing courtesy casework on behalf of another worker or another state
- Documentation of all casework activities.



Training to be Provided Utilizing CAPTA Funding

CPS workers are required to complete “Core” training as outlined in the training plan ([Training Plan](#)). Training activities for new employees, as well as for employees receiving training beyond the first year of service, focus on strengths-based and family-centered practice skills that require workers to engage the family, family team, and community partners.

Specialized program specific training will be developed. Specifically, CPS related training will focus on legal issues that relate to practice as well as on caseworkers ability to effectively use the SAFE data collection and management system.

Criminal Background Checks

USC [62A-2-120](#). Criminal background checks -- Direct access to children or vulnerable adults ([BackgroundChecks](#)) was amended in by the 2008 legislature and outlines the need for and procedures to be followed when conducting background checks for prospective foster and adoptive parents and other relatives and non-relatives living in the household. No amendments to that legislation were made in the 2009 legislative session.

Community Review Panels

Each of the five Division of Child and Family Services (DCFS) regions is required to establish, maintain and support a local Quality Improvement Committee (QIC). The DCFS state office also maintains and supports a statewide QIC that serves as the conduit for information and ideas presented by regional QICs. In addition, the state QIC develops, operates, updates, and maintains the QIC website, designed to aid in convenient access to information.

These committees carry out activities required of CPS Citizen Review Panels (CRP) as mandated by the Child Abuse Prevention and Treatment Act. QICs examine policies, procedures, and practices proposed, developed, or implemented by the Division of Child and Family Services (DCFS). They also review specific Child Protective Service cases to evaluate the extent to which the child protective services system is successfully discharging protection responsibilities

Each committee is coordinated by a citizen chair and is composed of citizen and community partners living or practicing within a region’s jurisdiction. Members have a stake in the outcome of services provided to children and families and are considered “informed evaluators” that give DCFS the best, most objective analysis about improvements needed to the state’s child welfare system.

Each QIC is required to review Child Protective Service related data and identify issues at least quarterly. Members also review DCFS policies, procedures, data, and case review information that measure the performance of programs and services provided. At least yearly QICs invite the following agencies to a committee meeting and receive reports that relate to child welfare trends or the status of child welfare services:



- The Office of Services Review that reports on Qualitative Case Review (QCR) and Case Process Review (CPR) outcomes
- The Office of Child Protection Ombudsman that reports on trends pertaining to client and consumer complaints about services delivered by the division
- The Department of Human Services Fatality Review Committee that presents results outlined in the Fatality Review Report.

To communicate their findings each QIC produces a quarterly summary that includes a description of:

- Data reviewed
- Public relation activities
- Special studies conducted
- CPS and Domestic Violence related issues
- Recommendations to be passed to the State QIC and/or DCFS administration.

The QIC Annual Report indicates where those committees are located, provides names of committee members, summarizes questions members submitted to DCFS administration, as well as lists the DCFS response to those questions.

Use of CAPTA Funding

CAPTA basic state grant funds will continue to be primarily targeted for activities and services that strengthen Child Protective Services provided after a child has been referred for abuse or neglect. Child abuse and neglect prevention efforts will be funded through other state and federal sources.

SECTION III

Chafee Foster Care Independence Program and Educational Training Voucher Plan 2010-2014

NUMBER OF YOUTH SERVED

Year	Number of Children 14 and older	Percent
FY04	1547	41%
FY05	1586	41%
FY06	1651	41%
FY07	1685	40%
FY08	1765	41%

CFCIP

DCFS administers the Transition to Adult Living (TAL) program and offers services to youth in foster care throughout the State of Utah. TAL is a continuum of services that begins while youth are in care and continues through post-discharge. TAL services are required for all youth receiving out of home services, age 14 or older, until



agency custody is terminated regardless of permanency goal.

Youth's strengths and needs are evaluated by completing the empirically validated life skills assessment. Based on that assessment a plan is developed that identifies a youth's strengths, needs, and specific services needed. Youth aged 14 or older are required to have a TAL plan. With staff guidance youth 16 or older take the lead in setting goals and facilitating the Child and Family Team. Basic Living Skills training is offered to each youth who is 16 years of age or older. Each youth who completes Basic Living Skills training may receive a payment for completing training.

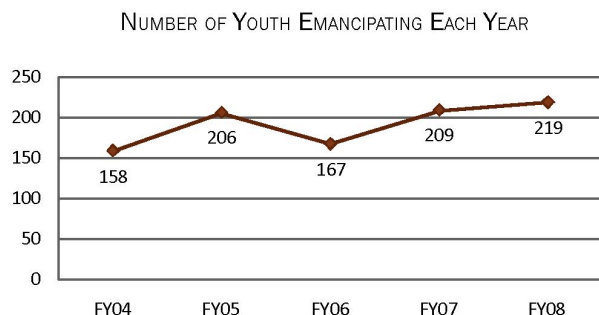
Eligibility for Chafee Services

R512-305. Out of Home Services, Transition to Adult Living Services ([TAL](#)) indicates "1) TAL services are required for all youth receiving out of home services, age 14 or older, until agency custody is terminated regardless of permanency goal, as specified in R512-300-4.D. 2) The YARN provides services for youth if they are no longer in care and are not yet 21, and the youth: a. Ages out of foster care, or b. While in foster care, after the age of 14, the youth received at least 12 consecutive months of TAL services and the court terminated reunification.

Services

YARN provides time-limited support to youth and is provided through support, financial aid, or Basic Life Skills Classes. Support may include housing, counseling, employment education, information and referral, mentoring, computer access for resources, follow-up support, and other appropriate support and services to complement a youth's efforts to achieve self-sufficiency.

A TAL placement may be used as an alternative to out of home care when it is determined that such a placement is in the best interest of the youth. A youth must be at least 16 years of age to be in a TAL placement and the youth may receive a TAL stipend while in the TAL placement. The appropriate types of living arrangements for youth in this situation include living with kin, living with former out of home caregivers while paying rent, living in the community with roommates of the same sex, living alone, living in a group facility, YWCA, boarding house, or dorm, or if approved by the regional director or his/her designee, living with an adult who has passed a background check.



ETV

The Department of Workforce Services (DWS) manages the ETV program through a contract with DCFS. ETV funds will be allocated to youth through an application and screening process and vouchers issued in compliance with ETV program requirements. Individual Education Assessment and



Individual Education Plans, coordinated by DWS, will be produced for each eligible applicant. A portion of ETV funds are used for two DWS positions that help youth navigate through their higher education experience and to ensure that youth receiving ETV funds are continuing to meet enrollment, satisfactory performance, and other program requirements.

Youth may receive vouchers up to a maximum amount of \$5,000 per year through the Education and Training Voucher Program. Amounts will continue to be determined by the cost of tuition at specific educational institutions and enrollment status. Applicants will receive written notice of approval or denial of the application. If denied, a written reason for denial will be provided and include instructions about how to appeal the decision.

Requirements for Eligibility for ETV Services

Utah Administrative Rule R512-306-3 states:

- 1) To be eligible for the Education and Training Voucher Program, an individual must meet all of the following requirements:
 - a) An individual in foster care who has not yet reached 21 years of age, or
 - b) An individual no longer in foster care, but who received 12 months of Transition to Adult Living services after the age of 14 while in foster care and the court terminated reunification, or
 - c) An individual no longer in foster care who reached 18 years of age while in foster care and who has not yet reached 21 years of age, or
 - d) An individual adopted from foster care after reaching 16 years of age and who has not yet attained 21 years of age, and
 - e) Has an individual educational assessment and individual education plan completed by the Division or their designee;
 - f) Submit a completed application for the Education and Training Voucher Program;
 - g) Be accepted to a qualified college, university, or vocational program;
 - h) Apply for and accept available financial aid from other sources before obtaining funding from the Education and Training Voucher Program;
 - i) Enroll as a full-time or part-time student in the college, university or vocational program; and
 - j) Maintain a 2.0 cumulative grade point average on a 4.0 scale or equivalent as determined by the educational institution.
- 2) The application and attachments will be reviewed and approved by regional Transition to Adult Living program staff or their designee. Individuals meeting all requirements will be accepted for program participation when Education and Training Voucher Program funding is available. If demand exceeds available funding, the division may establish a waiting list, which will then be awarded to the applicants in the order received on a first come first serve basis for funding or the division may approve applications for lesser amounts of funding. The individual will receive written notice of approval or denial of the application. If denied or terminated, a written reason for denial will be provided.



- 3) If an application for benefits under the Education and Training Voucher program is denied, the applicant has the right to appeal the decision through an administrative hearing in accordance with Section as per 63-46b-3 et seq.
- 4) The individual may participate in the Education and Training Voucher Program until the completion of the degree or vocational program; or they reach age 21. If an individual attains age 21 while enrolled in the Education and Training Voucher Program, the individual may continue in the program until age 23 as long as the individual is attending an accredited or pre-accredited college, university, or vocational program full-time or part-time, is making satisfactory progress, and funding continues to be available. The individual must make a written request and receive a written approval prior to his or her 21st birthday to be continued for eligibility for the Education and Training Voucher Program.
- 5) The individual must provide ongoing documentation of full-time or part-time enrollment, satisfactory progress as detailed in the individual education plan, additional requests for funding, and any changes in total costs for attendance or other financial aid to the division in order to continue receiving benefits under the program.
- 6) A program participant who receives less than a 2.0 GPA in a single grading period will be placed on probationary status and,
 - a) The individual will receive written notice of probationary status. The individual will have one subsequent grading period to regain or show significant progress toward a 2.0 GPA to continue in the program.
 - b) Upon completion of a satisfactory grading period, the participant will be notified that the probation period is over.
 - c) The participant that does not receive satisfactory grades while on probation will receive written notice of loss of eligibility for the Education and Training Voucher Program.
- 7) An individual under age 21 who has previously been denied acceptance to the program or who lost eligibility for the program due to not making satisfactory progress may reapply for the program at any time.
- 8) An individual may receive vouchers up to a maximum amount of \$5,000 per year through the Education and Training Voucher Program. Amounts are determined by the cost of tuition at specific educational institutions and enrollment status.
 - a) In accordance with 20 USC 1087kk, the total amount awarded may not exceed the total cost of attendance, as described in R512-306-4, minus:
 - i) expected contributions from the individual's family; and
 - ii) estimated financial assistance from other State or Federal grants or programs.
 - b) Awards are subject to the availability of Division Education and Training Voucher Program funds appropriated for this program.



c) In accordance with 42 USC 677(i)(5), the amount of benefits received through the Education and Training Voucher Program may be disregarded in determining an individual's eligibility for, or amount of, any other Federal or Federally supported assistance.

Other Educational Services

In addition to the above, youth are eligible for a "Transition to Adult Living Scholarship", which helps qualified youth who are transitioning out of foster care complete a post-secondary education program (degree or certificate) at one of the Utah System of Higher Education institutions. Private donors in partnership with the Utah Educational Savings Plan sponsor the scholarship. Students who are awarded the scholarship are required to be involved in extra-curricular activities and meet regularly with a mentor. Youth may also qualify for federal funding through a Pell Grant program. The award amounts for these grants are determined by financial need and availability of funds.

Services to Youth of Various Ages

Services to Youth 14-15 Years of Age

Specific services include:

At age 14 workers provide the following services to youth. They:

- Initiate and complete the Ansell-Casey Skills Assessment
- Help Youth obtain a birth certificate
- Develop a TAL plan that focuses on social activities, improving self-image, and developing skills such as laundry, preparing meals, and cleaning (household chores)
- Explore the need to help youth access a mentor
- Revisit the youth's family and search for family connections
- Help youth explore significant safe and healthy relationships including those with family, school counselors, family friends, neighbors, mentors, and others as important to the youth.

On top of those services above, at age 15 workers help youth open a savings account and/or incorporate a plan for saving money.

In addition to services and activities completed for youth age 14 and 15, workers participate in the following activities and provide the following services to youth at age 16:

- Initiate a referral to DWS/WIA Youth
- Help youth explore employment opportunities and obtain a part-time job, if appropriate.
- Help youth sign up for and complete driver's education and obtain a drivers license
- Help youth obtain a state identification card if the youth cannot get drivers license
- Begin Life Skills Workshops
- Assure youth have sufficient school credits



- Help youth prepare for high school graduation (or prepare an alternate plan in place for GED or vocational training)
- Help youth that are planning to attend post-secondary education complete ACT, SAT, ASVAB and other testing
- Help youth identify five personal connections
- Assure youth begin to facilitate child and family team meetings
- Help youth place their name on the waiting list at Housing Authority, if appropriate.

Workers participate in the following activities and provide the following services to youth, age 17, and likely to remain in Foster Care until age 18:

- Assure youth have sufficient school credits to graduate or have an alternate plan in place to obtain as GED or attend vocational training
- Six months prior to the youth's 18th birthday, enroll the youth in a drivers education course if a youth has not completed drivers education classes
- Help youth complete applications for school, training, Pell grants, and the ETV program
- Help youth enroll youth that have a mental illness diagnosis enroll in NAMI Bridges for Youth groups.

Prior to exiting foster care, workers provide the following services to youth Ages 18 through 20:

- Assure youth with chronic health problems meet with a nurse to learn skills that will help them self-manage their health problem
- Complete the Medicaid review (prior to exiting care at age 18) and provide necessary supporting documentation to the regional eligibility worker so that Medicaid coverage can continue uninterrupted
- Complete the Checklist for Youth Exiting Care that helps assure that youth have important documents such as birth certificates, Social Security cards, and ID
- Provide, at no cost, a copy of the youth's health and education records if the youth exists foster care by reason of having attained the age of majority.

Medicaid Coverage for Former Foster Youth Ages 18 to 20

Eligible youth who exit foster care after their 18th birthday continue to qualify for Medicaid coverage. The expanded Medicaid policy allows eligible youth to receive services to the age of 21.

Utah State Code 26-18-403-Medicaid Waiver for Independent Foster Care Adolescents went into effect July 1, 2006.

That Code states:

(1) For purposes of this section, an "independent foster care adolescent" includes any individual who reached 18 years of age while in the custody of the Division of Child and Family Services, or the Department of Human Services if the Division of Child and Family Services was the primary case manager, or a federally recognized Indian tribe.



- (2) An independent foster care adolescent is eligible, when funds are available, for Medicaid coverage until the individual reaches 21 years of age.
- (3) Before July 1, 2006, the division shall submit a state Medicaid Plan amendment to the Center For Medicaid Services to provide medical coverage for independent foster care adolescents effective fiscal year 2006-07.

Trust Funds

The State of Utah funds the Children's Trust Fund with monies received when individuals pay fees to obtain a certified copy of a birth certificate, including certified copies of supplementary and amended birth certificates. No Chafee funding is used to support the Trust Fund. Funds from the Children's Trust Account are used solely for community-based education, service, and treatment programs to prevent the occurrence and recurrence of child abuse and neglect.

Public and Private Sector Involvement

The private sector continues to devise and implement innovative programs and services delivered to youth in foster care. Recently, Operation Kids and Christmas Box International joined together to raise awareness and funds to help teens that have aged out of foster care. Funds are used to purchase and present Lifestart kits, filled with personal and household items youth need when setting up their own home. In addition private donors in partnership with the Utah Educational Savings Plan sponsor the Transition to Adult Living Scholarship, which helps qualified youth who are transitioning out of foster care complete a post-secondary education program (degree or certificate) at one of the Utah System of Higher Education institutions. Salt Lake City Housing Authority, as the recipient of the Family Unification Program, has worked with the Department of Human Services Discharge Planning committee and the local Transitions to Adult Living Coordinator within Child and Family Services to ensure that youth exiting foster care receive a portion of available transitional Section 8 housing.

Involvement of Youth

Youth continue to be involved in planning and carrying out activities that take place during the annual Transition to Adult Living Youth Summit. Through the statewide Youth Leadership Council, youth in foster care and foster care alumni are working together to plan the Youth Summit for 2009 that will be held at Utah State University. In addition, DCFS also employs a former foster youth who acts as a liaison to youth in foster care, as well as youth who have exited foster care, and coordinates many of the activities in which youth are involved.

Coordination with other State and Federal Programs

As mentioned above, the State of Utah Department of Workforce Services manages services provided through the ETV program. Furthermore, the State of Utah Department of Health coordinates Medicaid services delivered to youth, the Division of Substance Abuse and Mental Health refers youth to services that help youth resolve mental health issues, DWS coordinates food stamps and additional employment training, the Drivers License Division provides assistance in



obtaining a drivers license, and the Utah System of Higher Education helps youth identify additional training and education services that meet the needs of youth. In addition, DCFS partners with HUD's Family Unification Program and Salt Lake City Housing Authority provides FUP vouchers to youth who may be eligible for transitional housing for a period of 18 months. DCFS provides case management and YARN to youth who receive these housing vouchers.

Tribal Consultation Relating to the Programs and Services Using Chafee Funding

The division's Program and Practice Improvement Team, the Deputy Director for Program and Practice Improvement, and the ICWA Program Manager ensure that information is shared with the Native American Tribes in Utah to make them aware of the availability of CFCIP and ETV for Native children who have been in state or tribal custody and meet the eligibility requirements. Tribal representatives have been a part of the Transition to Adult Living Action Council, and meet quarterly through the State Indian Child Welfare Specialist Teleconference. At those meetings members discuss tribal issues, connect with other State ICWA specialists, discuss National statutes and policy, and through specific agreements with DCFS, collaborate to implement the Indian Child Welfare Act. No tribe has requested to develop an agreement with DCFS to administer or supervise the CFCIP or ETV program. The state has certified that it will negotiate in good faith with those tribes that do make such a request.

Fair and Equitable Treatment

Statewide Division rules and practice guidelines will guide the services received by youth entering the Independent Living Program. Each of the regions in the state will follow rules and practice guidelines as directed by statute. All administrative due process rights are afforded to individuals eligible to receive services from the Independent Living Program.

CFCIP/ETV Training

The Professional Development team continues to offer training on how to use the Ansell-Casey Life Skills Assessment as caseworkers provide services to youth. In addition, the Utah Foster Care Foundation will continue to offer training, implemented in July, 2008, specifically for resource families and providers that care for youth 14 and older.

Cooperation in National Evaluations/National Youth in Transition Database

On February 26, 2008, the Children's Bureau issued the final rule to implement the National Youth in Transition Database (NYTD). The Division of Child and Family Services will be required to begin collecting data by October 1, 2010, with the first submission of data to ACF due no later than May 15, 2011.

In order to meet this requirement, an implementation team was formed and has met several times with regional Transition to Adult Living Coordinators. That team has determined that services data



will be pulled from multiple modules in SAFE including sources that record one-time payments, action items from the Ansell-Casey Life Skills Assessment, youth placements, training completed, and new services received. The state is implementing a statewide curriculum for basic life skills training and has identified a means to map the curriculum in NYTD services fields.

The NYTD survey has been programmed into SAFE and also into a web application that will feed data directly into SAFE. TAL staff are talking to youth about the need and benefits of the survey and have included it as a topic to be discussed at the upcoming Youth Summit. To encourage youth to respond to the survey, the division is exploring the possibility of sending automatic e-mail notifications to youth. These e-mail messages will include a link to the survey and an embedded identifier that will enable the division to track a youth's participation. The state is also seeking permission to track youth exiting care on social networking sites.

The division foresees no barriers to implementation and do not have a need for technical assistance at this time.

Statistical and Supporting Information

Juvenile Justice Transfers

Youth age 10 – 18, that are in the custody of Child and Family Services, may be transferred to the custody of Juvenile Justice Services by the court if the youth has committed misdemeanor or felony acts that warrant placement in a more restrictive or rehabilitative environment than is provided by Child and Family Services. It is the delinquent behavior of the youth that will determine whether a youth meets the sentencing guidelines for Juvenile Justice Services.

Data from the SAFE database (the source of this information) as compiled by the Information, Evaluation and Research Team, indicates that in calendar year 2008, 58 youth with 59 open foster care cases were transferred from Division of Child and Family Services custody to the custody of the Division of Juvenile Justice Services.

Juvenile Justice Transfers	
Year	Number of Cases
FY 2004	69 cases 69 youth
FY 2005*	63 cases 62 youth
FY 2006	66 cases 66 youth
FY 2007	54 cases 54 youth
FY 2008*	59 cases 58 youth
* One youth during that year was the subject in more than one foster case. Each case was subsequently transferred to JJS.	



ICPC/ICAMA

The ICPC/ICAMA Administrator, in collaboration with the Information Systems (SAFE) Program Team, added an ICPC module to the SAFE database. That collaboration will continue to develop relevant forms that will enable ICPC staff to link client data with the SAFE database.

The ICPC/ICAMA Team recently completed Practice Guidelines, policies and procedures, as well as improved the ICPC website, resources used to support workers as they process these cases. The program has also developed the content of future training that will introduce these policies, procedures and tools to workers, court personnel, and others that may benefit from this information.

ICAMA Medical Adoption Data (7/01/07 -6/30/08)		
	Outgoing	Incoming
Referrals	105	204
Terminations	26	56

ICPC Data - FY - 2008 (7/1/07 – 6/30/08)		
	Incoming	Outgoing
All Adoptions	284	282
Foster Care	92	101
Parent	98	61
Kinship	150	164
All Residential	2,671	44
Terminations	4,095	658



Inter Country Adoptions

There were 11 children who entered DCFS custody in SFY 2008 from a disrupted/dissolved foreign adoption.

Child	Placement Agency	Country of Origin	Reason for the disruption/dissolution	Status/Plan for the Child
1	Unknown	Russia	Child perpetration/reactivity; lack of sufficient resources; unrealistic expectations	Adoption
2	Limiar USA	Brazil	Physical abuse/neglect by adoptive parents; lack of sufficient resources	Adoption
3	Limiar USA	Brazil	Physical abuse/neglect by adoptive parents: lack of sufficient resources	Adoption
4	Unknown	Brazil	Physical abuse/neglect by adoptive parents: lack of sufficient resources	Adoption
5	Limiar	Brazil	Physical abuse/neglect by adoptive parents: lack of sufficient resources	Adoption
6	World Association for Children and Parents	Russia	Dependency (parent incarcerated)	Guardianship with non-relative
7	Unknown	Russia	Lack of sufficient resources; ungovernable, child mental health issues	Independent living with relationship with adoptive parents
8	Unknown	Transylvania	Lack of sufficient resources; abuse/neglect/abandonment	Adoption
9	Unknown	Russia	Lack of sufficient resources; child mental illness; ungovernable	Independent living with relationship with adoptive parents
10	International Adoption	Honduras	Lack of sufficient resources; ungovernable	Reunification with adoptive parents
11	Unknown	Russia	Physical abuse	Adoption



Monthly Caseworker Visits

UTAH DIVISION OF CHILD AND FAMILY SERVICES CASEWORKER VISITS TO FOSTER CHILDREN AND VISITS IN HOME Federal Fiscal Year 2008				
Month/Year	Number Foster Children Served	Number of Foster Children with Visits	% of Children with Visits	% of Visits in the Home
Oct-07	2672	2555	95.62%	100%
Nov-07	2611	2496	95.60%	100%
Dec-07	2645	2502	94.59%	100%
Jan-08	2620	2495	95.23%	100%
Feb-08	2620	2508	95.73%	100%
Mar-08	2617	2501	95.57%	100%
Apr-08	2596	2466	94.99%	100%
May-08	2573	2454	95.38%	100%
Jun-08	2621	2496	95.20%	100%
Jul-08	2610	2511	96.21%	100%
Aug-08	2594	2468	95.14%	100%
Sep-08	2628	2495	94.94%	100%
	Federal Fiscal Year Averages		95.35%	100.00%

Utah child welfare foster care caseworkers are required in policy to have a face-to-face monthly visit in a child or youth's placement and, if verbal, to have a private conversation with them. When the caseworker makes the monthly visit they record an activity log in the SAFE Management Information System, and attach a policy stating they fulfilled this requirement. To extract the data for management purposes the Information Evaluation, and Research Team writes a query that looks at all foster care cases that have been opened at least 15 days during a month and determine what number and percent of them have the policy attachment for that month. Supervisors as well as external agencies that conduct annual process reviews review the documentation to assess whether the policy attachment was recorded correctly.

DCFS meets requirements as outlined under the Stephanie Tubbs Jones Child Welfare Service Program (Title IV-B Child and Family Services) Section 424(e)(1) and (2). The division will continue to use current procedures to ensure that it provides monthly home visits to at least 90% of children in foster care and anticipates that no technical assistance in this area will be required.

Payment Limitation: Title IV-B, Subpart 1

In FFY 2005, the State of Utah did not use its Title IV-B subpart 1 funds for childcare, foster care maintenance, or adoption assistance. Also, in FFY 2005, the state did not use state foster care maintenance funding as matching funds for Title IV-B subpart 1.



Education and Training Vouchers

111 youth received an ETV in FFY 2008. 102 youth were recipients of ongoing vouchers from FFY 2007. 9 youth were new to the program. As of May 30, 2009 there are 63 youth being served with ETV funding. All are ongoing vouchers. Since October 1, 2008 no new voucher recipients have received funding.

Licensing Waivers

Utah State Code [62A-4a-209](#). Emergency placement allows for case-by-case waivers of non-safety requirements for licensing relative foster family homes, Preliminary data collected to support this request shows that currently 1,748 relative caregivers care for 2,730 children.

	FY '04	FY '05	FY '06	FY'07	FY '08	FY '09 (7/1/08- 4/1/09)
Statewide Percentage of Children that Exit Custody to Care of a Relative (Including Adoption)	33%	29%	28%	24%	18%	39%
Statewide Number of New Licensed Specified Resource Families	106	126	203	270	291	197
Statewide Percentage of New Licensed Resource Families that are Specified Relative Homes	31%	25%	38%	45%	45%	40%
Statewide Percentage of Children that Reenter Custody after Discharge to a Relative	53%	54%	48%	42%	26%	21%

In an effort to ensure that children are placed in lasting and permanent placements as well as to enable kinship families to become aware of their support options, DCFS increased the number of supports to relatives and has devoted more time to relative families. Additionally, an increasing number of relative families are choosing to become licensed foster parents for the children they care for, which allows them more time to decide whether long-term guardianship is their best option for meeting the needs of the child.

Timely Home Studies

Following is data regarding Timely Home Studies required by the U.S. Department of Health and Human Services for their report to Congress. This data reflects Utah's use of the extended 75-day period to complete, "in a timely manner," a request from another state for a home study that assesses the safety and suitability of a Utah home that is a possible placement for a child in the custody of another state.



Study Type FY-2008 (7/1/07-6/30/08)	Closed within 60 days	Closed between 60 and 75 days	Closed over 75 days	TOTAL ICPC Cases
ICPC Adoption Home Study	11	4	17	32
ICPC Foster Home Study	11	4	44	59
108 ICPC Parent Home Study	36	11	17	64
ICPC Relative Home Study	45	14	31	90
TOTAL	103	33	109	245

The extended compliance period was needed for a number of reasons:

- The proposed placement may not be responsive to the home study worker
- Requested information and documentation may not be provided in a timely manner
- It takes an increased amount of time to complete complex background checks that require further investigation (complex background checks include those with incomplete or unverifiable information and/or questionable results)
- The lack of control over the licensing process since Foster Home Study requests are referred to the licensing agency
- Completion dates may not be entered into the SAFE database in a timely manner
- The high volume of requests may prevent workers from completing home studies in a timely manner.

To resolve the need for an extended compliance period, DCFS has taken the following actions:

- Developed more internal control over the entering of completion dates and other data in the SAFE database
- Implemented a database module that enables the collection of more accurate data and allows better monitoring by alerting workers when a case is approaching an overdue status
- Implemented guidelines, policies, and procedures to close the case at 60 days if the placement is not responding
- Developed curriculum to be used in training to be delivered to Region ICPC coordinators and workers that will help them become more efficient at monitoring and completing home studies.